



November 1, 2007

Shirlyn W. Johnson  
TennCare Examiner  
Department of Commerce & Insurance  
TennCare Division  
500 James Robertson Parkway, Suite 750  
Nashville, TN 37243-1169

Re: Review of NAIC 2007 Second Quarter Statement

Bullet # 1: Prepaid expense moved to Line # 23.

Bullet #2: Assigned enrollees for Prior Year corrected

Bullet #3: Explanation for Difference in Administrative Expenses (see Exhibit "A")

Bullet #4: Explanation for CASH FLOW (see Exhibit "B")

Bullet #5: Changes Financial Notes to read "NO CHANGE"

Bullet #6: General Interrogatory Item #10.2 has been changed to reflect NON-ADMITTED assets for Parent on pg. 2

Bullet #7: General Interrogatory # 17, we do not believe the correct answer for this is "N" we believe we are in compliance with the NAIC instructions based on our interpretation. If there is something based on TennCare regulations that makes this answer incorrect, please advise us of this.

Bullet #8: Line # 36 of the TennCare Operations Statement of Revenues & Expenses (2A) was updated to include Premium Tax in the summary Line.

Statement of Premiums and Fees for Taxation

The previously omitted interest will be added to the premium tax for the 4<sup>th</sup> quarter.

Sincerely

Cheryll A. Miller  
Financial Services Manager

QUARTERLY STATEMENT

AS OF JUNE 30, 2007  
OF THE CONDITION AND AFFAIRS OF THE

MEMPHIS MANAGED CARE CORPORATION

NAIC Group Code 0000 , 2006 NAIC Company Code 00000 Employer's ID Number 621539163  
(Current Period) (Prior Period)

Organized under the Laws of TENNESSEE , State of Domicile or Port of Entry Tennessee

Country of Domicile US

Licensed as business type:

Life Accident and Health [ ] Property/Casualty [ ] Hospital, Medical and Dental Service or Indemnity [ ]  
Dental Service Corporation [ ] Vision Service Corporation [ ] Other [ ]  
Health Maintenance Organization [ X ] Is HMO Federally Qualified? Yes (X) No ( )

Incorporated / Organized July 7, 1993 Commenced Business January 1, 1994

Statutory Home Office 1407 UNION AVE SUITE 200, MEMPHIS,, Tennessee 38104  
(Street and Number, City or Town, State and Zip Code)

Main Administrative Office 1407 UNION AVE SUITE 200, MEMPHIS,, Tennessee 38104 901-515-3022  
(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 1407 UNION AVE SUITE 200, MEMPHIS,, Tennessee 38104  
(Street and Number, City or Town, State and Zip Code)

Primary Location of Books and Records 1407 UNION AVE SUITE 200, MEMPHIS,, Tennessee 38104  
(Street and Number, City or Town, State and Zip Code)  
901-515-3022  
(Area Code) (Telephone Number)

Internet Website Address cmiller@mmcc-llc.com

Statutory Statement Contact CHERYLL ANNETTE MILLER 901-515-3022  
(Name) (Area Code) (Telephone Number) (Extension)  
cmiller@mmcc-llc.com 901-515-3722  
(E-Mail Address) (Fax Number)

Policyowners N/A  
Relations (Street and Number, City or Town, State and Zip Code)  
Contact and (Area Code) (Telephone Number) (Extension)  
Phone Number

OFFICERS

1. AL KING (President)
2. STEVEN BURKETT (Chairman)

VICE PRESIDENTS

DIRECTORS OR TRUSTEES

JEFF BRANDON  
JUDY BRIGGS  
STEVEN BURKETT  
BRENDA JETTER  
AL KING  
VERONICA MALLETT, DR.  
ELIZABETH OSTRIC  
STUART POLLY, DR.

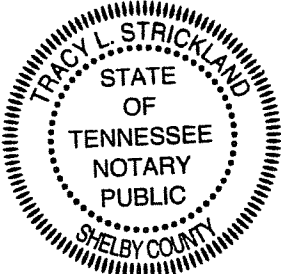
State of Tennessee } SS  
County of SHELBY }

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

AL KING President  
STEVEN BURKETT Chairman

Subscribed and sworn to before me this  
1 day of November 2007

MY COMMISSION EXPIRES:  
October 13, 2010



a. Is this an original filing? Yes ( ) No (X)  
b. If no: 1. State the amendment number 2  
2. Date filed November 1, 2007  
3. Number of pages attached 35

ASSETS

	Current Statement Date			4  Prior Year Net Admitted Assets
	1  Assets	2  Nonadmitted Assets	3 Net Admitted Assets (Col. 1 minus Col. 2)	
1. Bonds .....	19,524,529		19,524,529	20,291,225
2. Stocks:				
2.1 Preferred stocks .....				
2.2 Common stocks .....				
3. Mortgage loans on real estate:				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....				
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ ..... 5,341,877 ), cash equivalents (\$ ..... ) and short-term investments (\$ ..... ) .....	5,341,877		5,341,877	5,648,464
6. Contract loans (including \$ ..... premium notes) .....				
7. Other invested assets .....	1,412,462		1,412,462	1,415,186
8. Receivables for securities .....				
9. Aggregate write-ins for invested assets .....				
10. Subtotals, cash and invested assets (Line 1 to Line 9) .....	26,278,868		26,278,868	27,354,875
11. Title plants less \$ ..... charged off (for Title insurers only) .....				
12. Investment income due and accrued .....	226,920		226,920	217,686
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in the course of collection .....				
13.2 Deferred premiums , agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....				
13.3 Accrued retrospective premiums .....				
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers .....				
14.2 Funds held by or deposited with reinsured companies .....				
14.3 Other amounts receivable under reinsurance contracts .....				
15. Amounts receivable relating to uninsured plans .....	6,437,469		6,437,469	4,716,674
16.1 Current federal and foreign income tax recoverable and interest thereon .....				
16.2 Net deferred tax asset .....				
17. Guaranty funds receivable or on deposit .....				
18. Electronic data processing equipment and software .....	1,027,890	1,027,890		
19. Furniture and equipment , including health care delivery assets (\$ ..... ) .....	235,167	235,167		
20. Net adjustment in assets and liabilities due to foreign exchange rates .....				
21. Receivables from parent, subsidiaries and affiliates .....	548,948	3,000	545,948	282,861
22. Health care (\$ ..... ) and other amounts receivable .....	1,107,423	928,742	178,681	25,006
23. Aggregate write-ins for other than invested assets .....	757,047	757,047		
24. Total assets excluding Separate Accounts , Segregated Accounts and Protected Cell Accounts (Line 10 to Line 23) .....	36,619,732	2,951,846	33,667,886	32,597,102
25. From Separate Accounts , Segregated Accounts and Protected Cell Accounts .....				
26. Totals (Line 24 and Line 25) .....	36,619,732	2,951,846	33,667,886	32,597,102
DETAILS OF WRITE-INS				
0901. ....				
0902. ....				
0903. ....				
0998. Summary of remaining write-ins for Line 9 from overflow page .....				
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above) .....				
2301. PREPAID EXPENSES .....	757,047	757,047		
2302. ....				
2303. ....				
2398. Summary of remaining write-ins for Line 23 from overflow page .....				
2399. Totals (Line 2301 through Line 2303 plus Line 2398) (Line 23 above) .....	757,047	757,047		

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$ ..... reinsurance ceded) .....				
2. Accrued medical incentive pool and bonus amounts .....				
3. Unpaid claims adjustment expenses .....				
4. Aggregate health policy reserves .....				
5. Aggregate life policy reserves .....				
6. Property/casualty unearned premium reserve .....				
7. Aggregate health claim reserves .....				
8. Premiums received in advance .....				
9. General expenses due or accrued .....	476,206		476,206	183,420
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....				
10.2 Net deferred tax liability .....				
11. Ceded reinsurance premiums payable .....				
12. Amounts withheld or retained for the account of others .....	506,805		506,805	661,718
13. Remittances and items not allocated .....				
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....				
15. Amounts due to parent , subsidiaries and affiliates .....	191,133		191,133	192,695
16. Payable for securities .....				
17. Funds held under reinsurance treaties with (\$ ..... authorized reinsurers and \$ ..... unauthorized reinsurers) .....				
18. Reinsurance in unauthorized companies .....				
19. Net adjustments in assets and liabilities due to foreign exchange rates .....				
20. Liability for amounts held under uninsured plans .....	1,058,448		1,058,448	1,349,431
21. Aggregate write-ins for other liabilities (including \$ ..... current) .....				
22. Total liabilities (Line 1 to Line 21) .....	2,232,592		2,232,592	2,387,264
23. Aggregate write-ins for special surplus funds .....	X X X	X X X		
24. Common capital stock .....	X X X	X X X		
25. Preferred capital stock .....	X X X	X X X		
26. Gross paid in and contributed surplus .....	X X X	X X X	3,699,498	3,699,498
27. Surplus notes .....	X X X	X X X		
28. Aggregate write-ins for other than special surplus funds .....	X X X	X X X		
29. Unassigned funds (surplus) .....	X X X	X X X	27,735,796	26,510,340
30. Less treasury stock , at cost:				
30.1 ..... shares common (value included in Line 24 \$ ..... ) .....	X X X	X X X		
30.2 ..... shares preferred (value included in Line 25 \$ ..... ) .....	X X X	X X X		
31. Total capital and surplus (Line 23 to Line 29 minus Line 30) .....	X X X	X X X	31,435,294	30,209,838
32. Total Liabilities, capital and surplus (Line 22 and Line 31) .....	X X X	X X X	33,667,886	32,597,102
DETAILS OF WRITE-INS				
2101. ....				
2102. ....				
2103. ....				
2198. Summary of remaining write-ins for Line 21 from overflow page .....				
2199. Totals (Line 2101 through Line 2103 plus Line 2198) (Line 21 above) .....				
2301. ....	X X X	X X X		
2302. ....	X X X	X X X		
2303. ....	X X X	X X X		
2398. Summary of remaining write-ins for Line 23 from overflow page .....	X X X	X X X		
2399. Totals (Line 2301 through Line 2303 plus Line 2398) (Line 23 above) .....	X X X	X X X		
2801. ....	X X X	X X X		
2802. ....	X X X	X X X		
2803. ....	X X X	X X X		
2898. Summary of remaining write-ins for Line 28 from overflow page .....	X X X	X X X		
2899. Totals (Line 2801 through Line 2803 plus Line 2898) (Line 28 above) .....	X X X	X X X		

STATEMENT OF REVENUE AND EXPENSES

	Current Year to Date		Prior Year to Date
	1	2	3
	Uncovered	Total	Total
1. Member Months .....	X X X	1,005,539	1,031,779
2. Net premium income (including \$ ..... non-health premium income) .....	X X X		
3. Change in unearned premium reserves and reserve for rate credits .....	X X X		
4. Fee-for-service (net of \$ ..... medical expenses) .....	X X X		
5. Risk revenue .....	X X X		
6. Aggregate write-ins for other health care related revenues .....	X X X		
7. Aggregate write-ins for other non-health revenues .....	X X X		
8. Total revenues (Line 2 to Line 7) .....	X X X		
<b>Hospital and Medical:</b>			
9. Hospital/ medical benefits .....			
10. Other professional services .....			
11. Outside referrals .....			
12. Emergency room and out-of-area .....			
13. Prescription drugs .....			
14. Aggregate write-ins for other hospital and medical .....			
15. Incentive pool , withhold adjustments and bonus amounts .....			
16. Subtotal (Line 9 to Line 15) .....			
<b>Less:</b>			
17. Net reinsurance recoveries .....			
18. Total hospital and medical (Line 16 minus Line 17) .....			
19. Non-health claims (net) .....			
20. Claims adjustment expenses , including \$ ..... cost containment expenses .....			2,311,652
21. General administrative expenses .....		(1,685,995)	(5,490,565)
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only) .....			
23. Total underwriting deductions (Line 18 through Line 22) .....		(1,685,995)	(3,178,913)
24. Net underwriting gain or (loss) (Line 8 minus Line 23) .....	X X X	1,685,995	3,178,913
25. Net investment income earned .....		570,060	588,298
26. Net realized capital gains (losses) less capital gains tax of \$ .....			
27. Net investment gains (losses) (Line 25 plus Line 26) .....		570,060	588,298
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ ..... )] .....			
29. Aggregate write-ins for other income or expenses .....			89,449
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Line 24 plus Line 27 plus Line 28 plus Line 29) .....	X X X	2,256,055	3,856,660
31. Federal and foreign income taxes incurred .....	X X X		
32. Net income (loss) (Line 30 minus Line 31) .....	X X X	2,256,055	3,856,660
<b>DETAILS OF WRITE-INS</b>			
0601. ....	X X X		
0602. ....	X X X		
0603. ....	X X X		
0698. Summary of remaining write-ins for Line 6 from overflow page .....	X X X		
0699. Totals (Line 0601 through Line 0603 plus Line 0698) (Line 6 above) .....	X X X		
0701. ....	X X X		
0702. ....	X X X		
0703. ....	X X X		
0798. Summary of remaining write-ins for Line 7 from overflow page .....	X X X		
0799. Totals (Line 0701 through Line 0703 plus Line 0798) (Line 7 above) .....	X X X		
1401. ....			
1402. ....			
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page .....			
1499. Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above) .....			
2901. MRI REVENUE .....			25,133
2902. MEDCALL REVENUE .....			64,316
2903. ....			
2998. Summary of remaining write-ins for Line 29 from overflow page .....			
2999. Totals (Line 2901 through Line 2903 plus Line 2998) (Line 29 above) .....			89,449

STATEMENT OF REVENUE AND EXPENSES (continued)

CAPITAL AND SURPLUS ACCOUNT	1	2	3
	Current Year to Date	Prior Year To Date	Prior Year
33. Capital and surplus prior reporting year .....	30,209,840	26,539,158	27,804,505
34. Net income (loss) from Line 32 .....	2,256,055	3,856,660	8,205,507
35. Change in valuation basis of aggregate policy and claims reserves .....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....			
37. Change in net unrealized foreign exchange capital gain or (loss) .....			
38. Change in net deferred income tax .....			
39. Change in nonadmitted assets .....	(1,030,598)	(314,951)	(800,172)
40. Change in unauthorized reinsurance .....			
41. Change in treasury stock .....			
42. Change in surplus notes .....			
43. Cumulative effect of changes in accounting principles .....			
44. Capital Changes:			
44.1 Paid in .....			
44.2 Transferred from surplus (Stock Dividend) .....			
44.3 Transferred to surplus .....			
45. Surplus adjustments:			
45.1 Paid in .....			
45.2 Transferred to capital (Stock Dividend) .....			
45.3 Tranferred from capital .....			
46. Dividends to stockholders .....			(5,000,000)
47. Aggregate write-ins for gains or (losses) in surplus .....		1,266,197	
48. Net change in capital and surplus (Line 34 to Line 47) .....	1,225,457	4,807,906	2,405,335
49. Capital and surplus end of reporting period (Line 33 plus Line 48) .....	31,435,297	31,347,064	30,209,840
DETAILS OF WRITE-INS			
4701. AUDIT ADJUSTMENT .....		1,266,197	
4702. ....			
4703. ....			
4798. Summary of remaining write-ins for Line 47 from overflow page .....			
4799. Totals (Line 4701 through Line 4703 plus Line 4798) (Line 47 above) .....		1,266,197	

CASH FLOW

	1	2
	Current Year To Date	Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance		
2. Net investment income	560,826	1,260,863
3. Miscellaneous income	4,003	114,156
4. Total (Line 1 through Line 3)	564,829	1,375,019
5. Benefit and loss related payments		
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	7,600,819	11,484,345
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10. Total (Line 5 through Line9)	7,600,819	11,484,345
11. Net cash from operations (Line 4 minus Line 10)	(7,035,990)	(10,109,326)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	2,258,486	20,929,084
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Line 12.1 through Line 12.7)	2,258,486	20,929,084
13. Cost of investments acquired (long-term only):		
13.1 Bonds	1,486,342	15,767,942
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets	2,724	1,500,000
13.6 Miscellaneous applications		
13.7 Total investments acquired (Line 13.1 through Line 13.6)	1,489,066	17,267,942
14. Net increase or (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	769,420	3,661,142
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		(5,000,000)
16.6 Other cash provided (applied)	5,959,983	1,105,393
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	5,959,983	6,105,393
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(306,587)	(342,791)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	5,648,464	5,991,255
19.2 End of period (Line 18 plus Line 19.1)	5,341,877	5,648,464

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001		
20.0002		
20.0003		
20.0004		
20.0005		
20.0006		
20.0007		
20.0008		
20.0009		
20.0010		

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1  Total	Comprehensive (Hospital and Medical)		4  Medicare Supplement	5  Vision Only	6  Dental Only	7  Federal Employees Health Benefit Plan	8  Title XVIII Medicare	9  Title XIX Medicaid	10  Other
		2  Individual	3  Group							
Total Members at end of:										
1. Prior Year .....	2,054,603								2,054,603	
2. First Quarter .....	167,937								167,937	
3. Second Quarter .....	166,993								166,993	
4. Third Quarter .....										
5. Current Year .....										
6. Current Year Member Months .....	1,005,539								1,005,539	
Total Member Ambulatory Encounters for Period:										
7. Physician .....	157,453								157,453	
8. Non-Physician .....	6,057								6,057	
9. Total .....	163,510								163,510	
10. Hospital Patient Days Incurred .....	19,388								19,388	
11. Number of Inpatient Admissions .....	4,746								4,746	
12. Health Premiums Written (a) .....										
13. Life Premiums Direct .....										
14. Property/Casualty Premiums Written .....										
15. Health Premiums Earned .....										
16. Property/Casualty Premiums Earned .....										
17. Amount Paid for Provision of Health Care Services .....										
18. Amount Incurred for Provision of Health Care Services .....										

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....



CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
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NONE

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5  Claims Incurred in Prior Years (Columns 1 plus 3)	6  Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1  On Claims Incurred Prior to January 1 of Current Year	2  On Claims Incurred During the Year	3  On Claims Unpaid December 31 of Prior Year	4  On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....						
2. Medicare Supplement .....						
3. Dental only .....						
4. Vision only .....						
5. Federal Employees Health Benefits Plan .....						
6. Title XVIII - Medicare .....						
7. Title XIX - Medicaid .....						
8. Other health .....						
9. Health subtotal (Line 1 to Line 8) .....						
10. Healthcare recievables (a) .....						
11. Other non-health .....						
12. Medical incentive pools and bonus amounts .....						
13. Totals .....						

(a) Excludes \$ ..... loans or advances to providers not yet expensed.

## NOTES TO FINANCIAL STATEMENTS

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1. Summary of Significant Accounting Policies  
No Change
2. Accounting Changes and Corrections of Errors  
No Change
3. Business Combinations and Goodwill  
No Change
4. Discontinued Operations  
No Change
5. Investments  
No Change
6. Joint Ventures, Partnerships and Limited Liability Companies  
No Change
7. Investment Income  
No Change
8. Derivative Instruments  
No Change
9. Income Tax  
No Change
10. Information Concerning Parent, Subsidiaries and Affiliates  
No Change
11. Debt  
No Change
12. Retirement Plans, Deferred Compensation, Post Employment Benefits and Compensated Absences and other Postretirement Benefit Plans  
No Change
13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi Re-organizations.  
No Change
14. Contingencies  
No Change
15. Leases  
No Change
16. Information about Financial Instruments with off Balance Sheet risk and Financial; Instruments with concentrations of Credit Risk  
No Change
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
  - A. No Change
  - B. No Change
  - C. Memphis Managed Care Corporation did not engage in any wash sales for the quarter Ending June 30, 2007
18. Gain or Loss to the company from Uninsured A&H Plans and Uninsured  
No Change
19. Direct Premium Written/Produced by managing general agents/third party administrators.  
No Change
20. September 11 Events  
No Change
21. Other Items  
No Change
22. Events Subsequent  
No Change
23. Reinsurance  
No Change

**NOTES TO FINANCIAL STATEMENTS**

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- 24. Retrospectively Rated Contracts  
No Change
  
- 25. Change in Incurred Claims and Claim Adjustment Expenses  
No Change
  
- 26. Intercompany Pooling Agreements  
No Change
  
- 27. Structured Settlements  
No Change
  
- 28. Health Care Receivables  
No Change
  
- 29. Participating Policies  
No Change
  
- 30. Premium Deficiency Reserves  
No Change
  
- 31. Anticipated Salvage & Subrogation  
No Change

STATEMENT AS OF JUNE 30, 2007 OF THE MEMPHIS MANAGED CARE CORPORATION

NOTES TO FINANCIAL STATEMENTS - ITEM 1A

1	2	3	4
State Prescribed Practices	Current	Prior	State of Domicile

NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 5A02

1	2	3
Percent Reduced	Investment Excluding Accrued Interest	Number of Mortgages

NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 13.10

	1	2	3	4	5	6	7	8
Description of Assets, Holder of Note and Other	Date Issued	Interest Rate	Par Value (Face Amount of Notes)	Carrying Value of Note	Principal and/or Interest Paid Current Year	Total Principal and/or Interest Paid	Unapproved Principal and/or Interest	Date of Maturity

NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 13.11

1	2	3
Year (Starting with Current Year)	Change in Year Surplus	Change in Gross Paid-in and Contributed Surplus

NONE

STATEMENT AS OF JUNE 30 , 2007 OF THE MEMPHIS MANAGED CARE CORPORATION

NOTES TO FINANCIAL STATEMENTS - ITEM 19

Name and Address of Managing General Agent or Third Party Administrator	FEIN Number	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premiums Written/ Produced By
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NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 23

Name of Reinsurer	Amount
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NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 28A

1  Quarter	2  Estimated Pharmacy Rebates as Reported on Financial Statements	3  Pharmacy Rebates as Billed or Otherwise Confirmed	4  Actual Rebates Received Within 90 Days of Billing	5  Actual Rebates Received Within 91 to 180 Days of Billing	6  Actual Rebates Received More Than 180 Days After Billing
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NONE

NOTES TO FINANCIAL STATEMENTS - ITEM 28B

1  Calendar Year	2  Evaluation Period Year Ending	3  Risk Sharing Receivable as Estimated in the Prior Year	4  Risk Sharing Receivable as Estimated in the Current Year	5  Risk Sharing Receivable Billed	6  Risk Sharing Receivable Not Yet Billed	7  Actual Risk Sharing Amounts Received in Year Billed	8  Actual Risk Sharing Amounts Received First Year Subsequent	9  Actual Risk Sharing Amounts Received Second Year Subsequent	10  Actual Risk Sharing Amounts Received - All Other
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NONE

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile , as required by the Model Act?

Yes ( ) No (X)
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ( ) No ( )
- 2.1

Has any change been made during the year of this statement in the charter , by-laws , articles of incorporation , or deed of settlement of the reporting entity?

Yes ( ) No (X)
- 2.2

If yes, date of change:

.....
3.

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ( ) No (X)
- If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ( ) No (X)
- 4.2

If yes, provide name of entity , NAIC Company Code , and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....	.....	.....
.....	.....	.....
.....	.....	.....

5.

If the reporting entity is subject to a management agreement , including third-party administrator (s) , managing general agent (s) , attorney-in-fact , or similar agreement , have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ( ) No ( ) N/A (X)
- If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made .

12/31/2006
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity .  
This date should be the date of the examined balance sheet and not the date the report was completed or released .

06/30/2005
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity .  
This is the release date or completion date of the examination report and not the date of the examination (balance sheet date) .

03/24/2006
- 6.4

By what department or departments?

DEPARTMENT OF COMMERCE AND INSURANCE TENNCARE DIVISION  
.....
- 7.1

Has this reporting entity had any Certificates of Authority , licenses or registrations (including corporate registration , if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action , either formal or informal , if a confidentiality clause is part of the agreement .)

Yes ( ) No (X)
- 7.2

If yes, give full information

.....  
.....
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ( ) No (X)
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company .

.....  
.....
- 8.3

Is the company affiliated with one or more banks , thrifts or securities firms?

Yes ( ) No (X)
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB) , the Office of the Comptroller of the Currency (OCC) , the Office of Thrift Supervision (OTS) , the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator .

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC
.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....

GENERAL INTERROGATORIES (continued)

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted . )

- 9.1

Are the senior officers ( principal executive officer , principal financial officer , principal accounting officer or controller , or persons performing similar functions ) of the reporting entity subject to a code of ethics , which includes the following standards?  
(a) Honest and ethical conduct , including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full , fair , accurate , timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws , rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code .

Yes (X) No ( )
- 9.11

If the response to 9.1 is No , please explain:  
  
.....  
.....
- 9.2

Has the code of ethics for senior managers been amended?

Yes ( ) No (X)
- 9.21

If the response to 9.2 is Yes , provide information related to amendment (s) .  
  
.....  
.....
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ( ) No (X)
- 9.31

If the response to 9.3 is Yes , provide the nature of any waiver (s) .  
  
.....  
.....

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent , subsidiaries or affiliates on Page 2 of this statement?

Yes (X) No ( )
- 10.2

If yes , indicate the amounts receivable from parent included in the Page 2 amount:

\$ .....

INVESTMENT

- 11.1

Has there been any change in the reporting entity's own preferred or common stock?

Yes ( ) No (X)
- 11.2

If yes , explain  
  
.....  
.....
- 12.1

Were any of the stocks , bonds , or other assets of the reporting entity loaned , placed under option agreement , or otherwise made available for use by another person? (Exclude securities under securities lending agreements . )

Yes ( ) No (X)
- 12.2

If yes , give full and complete information relating thereto:  
  
.....  
.....
13.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$ .....
14.

Amount of real estate and mortgages held in short-term investments:

\$ .....
- 15.1

Does the reporting entity have any investments in parent , subsidiaries and affiliates?

Yes (X) No ( )
- 15.2

If yes , please complete the following:
- |  | 1<br>Prior Year-End Book/<br>Adjusted Carrying Value | 2<br>Current Quarter Book/<br>Adjusted Carrying Value |
|--|--|---|
| 15.21 Bonds .....  | \$ .....   | \$ .....  |
| 15.22 Preferred Stock .....  | \$ .....   | \$ .....  |
| 15.23 Common Stock .....   | \$ .....   | \$ .....  |
| 15.24 Short-Term Investments .....   | \$ .....   | \$ .....  |
| 15.25 Mortgage Loans on Real Estate .....  | \$ .....   | \$ .....  |
| 15.26 All Other .....  | \$ ..... 1,415,786                                   | \$ ..... 1,412,462                                    |
| 15.27 Total Investment in Parent , Subsidiaries and Affiliates (Subtotal Line 15.21 to Line 15.26) ..... | \$ ..... 1,415,786                                   | \$ ..... 1,412,462                                    |
| 15.28 Total Investment in Parent included in Line 15.21 to Line 15.26 above .....                        | \$ .....   | \$ .....  |
- 16.1

Has the reporting entity entered into any hedging transactions reported on schedule DB?

Yes ( ) No (X)
- 16.2

If yes , has a comprehensive description of the hedging program been made available to the domiciliary state?  
  
If no , attach a description with this statement.

Yes ( ) No ( )



GENERAL INTERROGATORIES (continued)

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted.)

17. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.J-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?
- Yes (X) No ( )

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian (s)	2 Custodian Address
SUNTRUST BANK .....	P.O. BOX 622227, ORLAND, FL. 32862-2227 .....
REGIONS BANK .....	6000 POPLAR, SUITE 300, MEMPHIS, TN. 38119 .....
.....	.....

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....	.....	.....
.....	.....	.....
.....	.....	.....

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter?

Yes ( ) No (X)

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

17.5 Identify all investment advisors, brokers/dealers c  
on behalf of the reporting entity:

ndle securities and have authority to make investments

1 Central Registration Depository	NONE	3 Address
.....		.....
.....		.....
.....		.....
.....		.....

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes ( ) No (X)

18.2 If no, list exceptions:

.....

.....

SCHEDULE A - VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book /adjusted carrying value, December		
2. Increase (decrease) by adjustment		
3. Cost of acquired		
4. Cost of additions to and permanent improv		
5. Total profit (loss) on sales		
6. Increase (decrease) by foreign exchange		
7. Amount received on sales		
8. Book/adjusted carrying value at end of cu		
9. Total valuation allowance		
10. Subtotal (Line 8 plus Line 9)		
11. Total nonadmitted amounts		
12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest on mortgages owned, December 31 of prior year		
2. Amount loaned during period:		
2.1. Actual cost at time of acquisitions		
2.2. Additional investment made after a		
3. Accrual of discount and mortgage interest		
4. Increase (decrease) by adjustment		
5. Total profit (loss) on sale		
6. Amounts paid on account or in full during t		
7. Amortization of premium		
8. Increase (decrease) by foreign exchange		
9. Book value/recorded investment excluding		
10. Total valuation allowance		
11. Subtotal (Line 9 plus Line 10)		
12. Total nonadmitted amounts		
13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column)		

SCHEDULE BA - VERIFICATION

Other Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	1,415,186	1,415,186
2. Cost of acquisitions during period:		
2.1. Actual cost at time of acquisitions		
2.2. Additional investment made after acquisitions		
3. Accrual of discount		
4. Increase (decrease) by adjustment	(2,724)	
5. Total profit (loss) on sale		
6. Amounts paid on account or in full during the period		
7. Amortization of premium		
8. Increase (decrease) by foreign exchange adjustment		
9. Book /adjusted carrying value of long-term invested assets at end of current period	1,412,462	1,415,186
10. Total valuation allowance		
11. Subtotal (Line 9 plus Line 10)	1,412,462	1,415,186
12. Total nonadmitted amounts		
13. Statement value of long term invested assets at end of current period (Page 2, Line 7, Column 3)	1,412,462	1,415,186

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book /adjusted carrying value of bonds and stocks, December 31 of prior year	20,291,225	17,364,710
2. Cost of bonds and stocks acquired	1,486,342	15,921,823
3. Accrual of discount		
4. Increase (decrease) by adjustment		
5. Increase (decrease) by foreign exchange adjustment		
6. Total profit (loss) on disposal		
7. Consideration for bonds and stocks disposed of	900,000	11,805,000
8. Amortization of premium	1,353,038	1,190,308
9. Book/adjusted carrying value, current period	19,524,529	20,291,225
10. Total valuation allowance		
11. Subtotal (Line 9 plus Line 10)	19,524,529	20,291,225
12. Total nonadmitted amounts		
13. Statement value	19,524,529	20,291,225

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1.....	18,941,824	1,486,342	900,000	(3,637)	18,941,824	19,524,529		20,291,225
2. Class 2.....								
3. Class 3.....								
4. Class 4.....								
5. Class 5.....								
6. Class 6.....								
7. Total Bonds.....	18,941,824	1,486,342	900,000	(3,637)	18,941,824	19,524,529		20,291,225
PREFERRED STOCK								
8. Class 1.....								
9. Class 2.....								
10. Class 3.....								
11. Class 4.....								
12. Class 5.....								
13. Class 6.....								
14. Total Preferred Stock.....								
15. Total Bonds and Preferred Stock.....	18,941,824	1,486,342	900,000	(3,637)	18,941,824	19,524,529		20,291,225

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
8299999 Totals .....	NONE				

SCHEDULE DA - PART 2 - VERIFICATION

Short-Term Investments Owned

	1	2
	Year To Date	Prior Year Ended December 31
1. Book / adjusted carrying value, December 31 of prior year .....		
2. Cost of short-term investments acquired .....		
3. Increase (decrease) by adjustment .....		
4. Increase (decrease) by foreign exchange adjustment .....		
5. Total profit (loss) on disposal of short-term investments .....	NONE	
6. Consideration received on disposal of short-term investments .....		
7. Book / adjusted carrying value, current period .....		
8. Total valuation allowance .....		
9. Subtotal (Line 7 plus Line 8) .....		
10. Total nonadmitted amounts .....		
11. Statement value (Line 9 minus Line 10) .....		
12. Income collected during period .....		
13. Income earned during period .....		

SCHEDULE DB - PART F - SECTION 1

Replicated (Synthetic) Assets Open

Replicated (Synthetic) Asset					Components of the Replicated (Synthetic) Asset						
1	2	3	4	5	Derivative Instruments Open		Cash Instrument(s) Held				
Replication RSAT Number	Description	NAIC Designation or Other Description	Statement Value	Fair Value	6	7	8	9	10	11	12
					Description	Fair Value	CUSIP	Description	Statement Value	Fair Value	NAIC Designation or Other Description

NONE

SCHEDULE DB - PART F - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year To Date	
	1	2	3	4	5	6	7	8	9	10
	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value	Number of Positions	Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory .....										
2. Add: Opened or Acquired Transactions .....										
3. Add: Increases in Replicated Asset Statement Value .....	X X X						X X X		X X X	
4. Less: Closed or Disposed of Transactions .....										
5. Less: Positions Disposed of for Failing Effectiveness Criteria .....										
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value .....	X X X						X X X		X X X	
7. Ending Inventory .....										

NONE

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4  Name of Reinsurer	5  Location	6 Type of Reinsurance Ceded	7 Is Insurer Authorized? (Yes or No)
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NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		1	Direct Business Only Year to Date							
			2	3	4	5	6	7	8	9
States, Etc.		Is Insurer Licensed ? (Yes or No)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Column 2 Through Column 7	Deposit-Type Contracts
1.	Alabama	AL	No							
2.	Alaska	AK	No							
3.	Arizona	AZ	No							
4.	Arkansas	AR	No							
5.	California	CA	No							
6.	Colorado	CO	No							
7.	Connecticut	CT	No							
8.	Delaware	DE	No							
9.	District of Columbia	DC	No							
10.	Florida	FL	No							
11.	Georgia	GA	No							
12.	Hawaii	HI	No							
13.	Idaho	ID	No							
14.	Illinois	IL	No							
15.	Indiana	IN	No							
16.	Iowa	IA	No							
17.	Kansas	KS	No							
18.	Kentucky	KY	No							
19.	Louisiana	LA	No							
20.	Maine	ME	No							
21.	Maryland	MD	No							
22.	Massachusetts	MA	No							
23.	Michigan	MI	No							
24.	Minnesota	MN	No							
25.	Mississippi	MS	No							
26.	Missouri	MO	No							
27.	Montana	MT	No							
28.	Nebraska	NE	No							
29.	Nevada	NV	No							
30.	New Hampshire	NH	No							
31.	New Jersey	NJ	No							
32.	New Mexico	NM	No							
33.	New York	NY	No							
34.	North Carolina	NC	No							
35.	North Dakota	ND	No							
36.	Ohio	OH	No							
37.	Oklahoma	OK	No							
38.	Oregon	OR	No							
39.	Pennsylvania	PA	No							
40.	Rhode Island	RI	No							
41.	South Carolina	SC	No							
42.	South Dakota	SD	No							
43.	Tennessee	TN	No							
44.	Texas	TX	No							
45.	Utah	UT	No							
46.	Vermont	VT	No							
47.	Virginia	VA	No							
48.	Washington	WA	No							
49.	West Virginia	WV	No							
50.	Wisconsin	WI	No							
51.	Wyoming	WY	No							
52.	American Samoa	AS	No							
53.	Guam	GU	No							
54.	Puerto Rico	PR	No							
55.	U. S. Virgin Islands	VI	No							
56.	Northern Mariana Islands	MP	No							
57.	Canada	CN	No							
58.	Aggregate Other Alien	OT	X X X							
59.	Subtotal		X X X							
60.	Reporting entity contributions for Employee Benefit Plans		X X X							
61.	Total (Direct Business)	(a)								
DETAILS OF WRITE-INS										
5801.										
5802.										
5803.										
5898.	Summary of remaining write-ins for Line 58 from overflow page									
5899.	Total (Line 5801 through Line 5803 plus Line 5898) (Line 58 above)									

(a) Insert the number of yes responses except for Canada and Other Alien.



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES  
OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

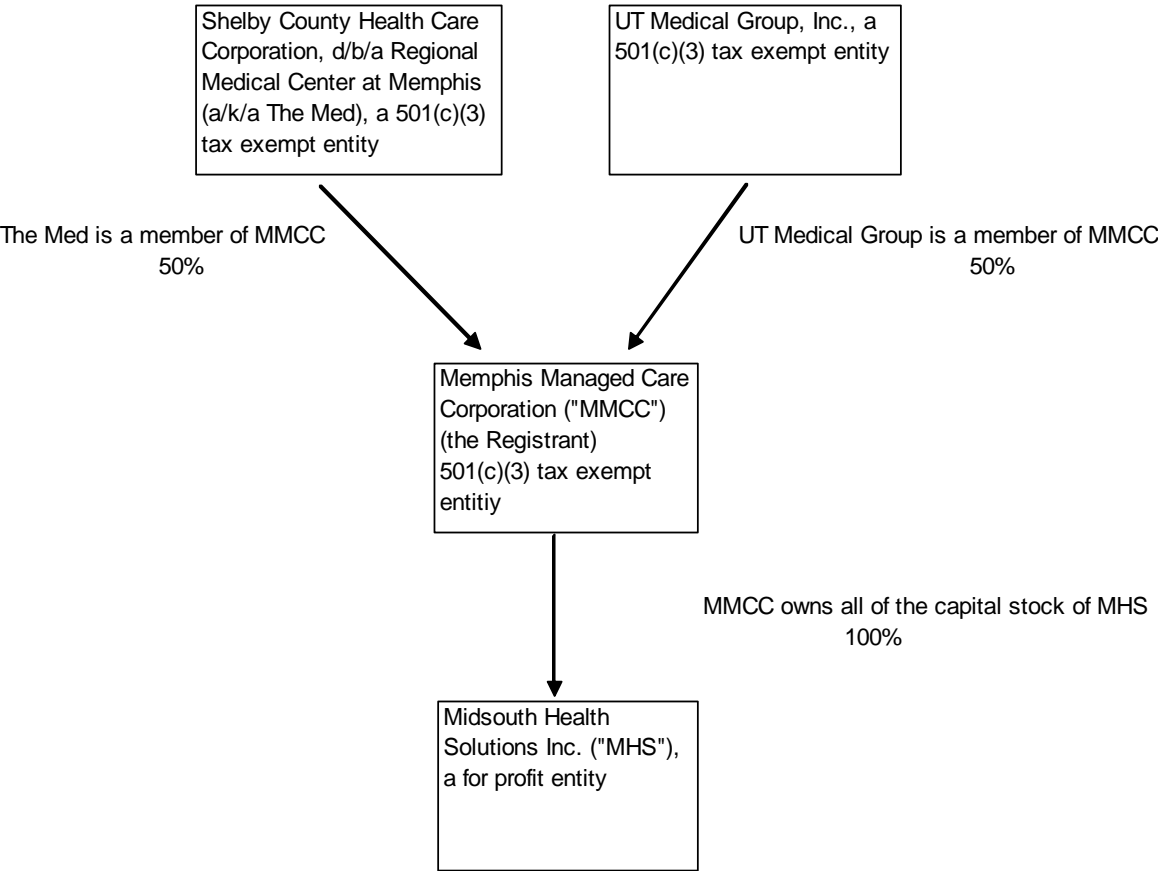
All entity members of a Holding Company Group that have acquired and /or disposed of any domestic entity (s) since filing the last annual or quarterly statement shall prepare a common schedule for inclusion in each of the individual quarterly statements

PART 1 - ORGANIZATIONAL LISTING

1	2	3	4	5	6
NAIC Group Code	Group Name	NAIC Company Code	State of Domicile	FEI Number	Name of Company
.....	UT MEDICAL GROUP INC. & REGIONAL MEDICAL .....	TX .....	20-4063319 .....	MID-SOUTH HEALTH SOLUTIONS .....	
.....	UT MEDICAL GROUP INC. & REGIONAL MEDICAL .....	TX .....	62-1539163 .....	MEMPHIS MANAGED CARE INC. ....	

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES  
OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing . However , in the event that your company does not transact the type of business for which the special report must be filed , your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below . If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATIONS and provide an explanation following the interrogatory questions .

	RESPONSE
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

EXPLANATIONS:

.....

BAR CODE:

Document Identifier 365:

SCHEDULE A - PART 2

Showing All Real Estate ACQUIRED During the Current Quarter

1  Description of Property	Location		4  Date Acquired	5  Name of Vendor	6  Actual Cost	7  Amount of Encumbrances	8 Book / Adjusted Carrying Value Less Encumbrances	9 Expended for Additions and Permanent Improvements
	2  City	3  State						

NONE

SCHEDULE A - PART 3

Showing All Real Estate SOLD During the Quarter , Including Payments During the Final Year on "Sales under Contract"

1  Description of Property	Location		4  Disposal Date	5  Name of Purchaser	6  Actual Cost	7	8	9	10	11 Book/Adjusted Carrying Value Less Encumbrances	12  Amounts Received	13  Foreign Exchange Profit (Loss) on Sale	14  Realized Profit (Loss) on Sale	15  Total Profit (Loss) on Sale	16  Gross Income Earned Less Interest Incurred on Encumbrances	17  Taxes, Repairs and Expenses Incurred
	2  City	3  State				Book/Adjusted Carrying Value Less Encumbrances Prior Year	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Expended for Additions, Permanent Improvements and Changes in Encumbrances							

NONE

SCHEDULE B - PART 1

Showing All Mortgage Loans ACQUIRED during the Current Quarter

1	Location		4	5	6	7	8	9	10	11	12
Loan Number	2	3	Loan Type	Actual Cost	Date Acquired	Rate of Interest	Book Value/Recorded Investment Excluding Accrued Interest	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Value of Land and Buildings	Date of Last Appraisal or Valuation
	City	State									

NONE

SCHEDULE B - PART 2

Showing All Mortgage Loans SOLD , Transferred or Paid in Full During the Current Quarter

1	Location		4	5	6	7	8	9	10	11	12	13
Loan Number	2	3	Loan Type	Date Acquired	Book Value/Recorded Investment Excluding Accrued Interest Prior Year	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Book Value/Recorded Investment Excluding Accrued Interest at Disposition	Consideration Received	Foreign Exchange Profit (Loss) on Sale	Realized Profit (Loss) on Sale	Total Profit (Loss) on Sale
	City	State										

NONE

SCHEDULE BA - PART 1

Showing Other Long-Term Invested Assets ACQUIRED During the Current Quarter

1  CUSIP Identification	2  Name or Description	Location		5  Name of Vendor or General Partner	6  NAIC Designation	7  Date Originally Acquired	8  Type and Strategy	9  Actual Cost	10  Amount of Encumbrances	11  Book/Adjusted Carrying Value Less Encumbrances	12  Fair Value	13  Increase (Decrease) by Adjustment	14  Increase (Decrease) By Foreign Exchange Adjustment	15  Commitment for Additional Investment	16  Percentage of Ownership
		3  City	4  State												
		Joint Venture, Partnership or Limited Liability Company Interests That Have the Underlying Characteristics of Common Stock - Affiliated													
	MID SOUTH HEALTH SOLUTIONS	MEMPHIS	TENNESSEE	MID SOUTH HEALTH SOLUTIONS		02/01/2006		1,500,000		1,422,728					100.000
1699999	Subtotal - Joint Venture, Partnership or Limited Liability Company Interests That Have the Underlying Characteristics of Common Stock - Affiliated							1,500,000		1,422,728					
4099999	TOTAL - Affiliated							1,500,000		1,422,728					
4199999	TOTALS							1,500,000		1,422,728					

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets SOLD, Transferred or Paid in Full During the Current Quarter

1  CUSIP Identification	2  Name or Description	Location		5  Name of Purchaser or Nature of Disposal	6  Date Originally Acquired	7  Book/Adjusted Carrying Value Less Encumbrances Prior Year	8  Increase (Decrease) by Adjustment	9  Increase (Decrease) by Foreign Exchange Adjustment	10  Book/Adjusted Carrying Value less Encumbrances on Disposal	11  Consideration Received	12  Foreign Exchange Gain (Loss) on Disposal	13  Realized Gain (Loss) on Disposal	14  Total Gain (Loss) on Disposal	15  Investment Income
		3  City	4  State											

NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U. S. Governments									
912795-ZY-0	U. S. TREASURY		04/10/2007	LEHMAN BROTHERS		195,948	200,000.00		1
912795-A6-8	U. S. TREASURY		06/07/2007	G. X. CLARKE & COMPANY		196,557	200,000.00		1
0399999	Subtotal - Bonds - U. S. Governments					392,505	400,000.00		
Bonds - All Other Governments									
3133XK-HD-0	FEDERAL HOME LOAN BANK		04/24/2007	CREWS & ASSOCIATES		600,000	600,000.00	13,125	1
31331S-JK-0	FEDERAL HOME CREDIT BANK		04/10/2007	G. X. CLARKE & COMPANY		97,933	100,000.00	797	1
31331S-SA-2	FEDERAL HOME CREDIT BANK		06/18/2007	G. X. CLARKE & COMPANY		99,698	100,000.00	1,043	1
1099999	Subtotal - Bonds - All Other Governments					797,631	800,000.00	14,965	
Bonds - Industrial and Miscellaneous (Unaffiliated)									
22541L-AL-7	CREDIT SUSSIE FB USA		04/27/2007	FTN FINANCIAL SECURITIES		98,226	100,000.00		3
36962G-B7-8	GENERAL ELECTRIC CAPITAL CORP.		05/23/2007	PERDHING LLC		98,369	100,000.00	214	3
91324P-AJ-1	UNITED HEALTH GROUP INC.		06/08/2007	FTN FINANCIAL SECURITIES		99,611	100,000.00	1,059	3
4599999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					296,206	300,000.00	1,273	
6099997	Subtotal - Bonds - Part 3					1,486,342	1,500,000.00	16,238	
6099999	Subtotal - Bonds					1,486,342	1,500,000.00	16,238	
7499999	TOTALS					1,486,342		16,238	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

STATEMENT AS OF JUNE 30, 2007 OF THE MEMPHIS MANAGED CARE CORPORATION

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of  
by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identifi- cation	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amort- ization) / Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B. /A. C. V. (11+12-13)	Total Foreign Exchange Change in B. /A. C. V.	Book /Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Maturity Date	NAIC Designa- tion or Market Indi- cator (a)
Bonds - U. S. Governments																					
912795-ZK-0	U. S. TREASURY		06/07/2007	REGIONS BANK		200,000	200,000.00	197,706	197,706						200,000					06/07/2007	1
912795-ZA-2	U. S. TREASURY		04/05/2007	REGIONS BANK		100,000	100,000.00	99,615	99,615						100,000				385	04/05/2007	1
0399999 - Subtotal - Bonds - U. S. Governments						300,000	300,000.00	297,321	297,321						300,000				385		
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
17252M-AE-0	CINTAS CORP		06/01/2007	REGIONS BANK		100,000	100,000.00	102,935	100,549		(2,386)				100,000				2,563	06/01/2007	3
22541L-AD-5	CREDIT SUISSIE FB USA		04/16/2007	REGIONS BANK		100,000	100,000.00	100,937	100,207		(730)				100,000				2,875	04/15/2007	3
46625H-AP-5	J P MORGAN CHASE & CO		05/30/2007	REGIONS BANK		100,000	100,000.00	100,648	100,158		(490)				100,000				2,625	05/30/2007	3
524908-CK-4	LEHMAN BROTHERS HOLDING INC		06/15/2007	REGIONS BANK		100,000	100,000.00	101,822	101,148		(674)				100,000				4,125	06/15/2007	3
617446-HB-8	MORGAN STANLEY GROUP INC		04/02/2007	REGIONS BANK		100,000	100,000.00	100,527	100,135		(392)				100,000				2,900	04/01/2007	3
87612E-AD-8	TARGET CORP		04/02/2007	REGIONS BANK		100,000	100,000.00	103,549	100,431		(3,118)				100,000				2,750	04/01/2007	3
4599999 - Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						600,000	600,000.00	610,418	602,628		(7,790)				600,000				17,838		
6099997 - Subtotal - Bonds - Part 4						900,000	900,000.00	907,739	899,949		(7,790)				900,000				18,223		
6099999 - Subtotal - Bonds						900,000	900,000.00	907,739	899,949		(7,790)				900,000				18,223		
7499999 - TOTALS						900,000		907,739	899,949		(7,790)				900,000				18,223		

(a) For all common stock bearing the NAIC market indicator 'U' provide: the number of such issues



SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors and Insurance Futures Options Owned at Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14
Description	Number of Contracts or Notional Amount	Date of Maturity, Expiry, or Settlement	Strike Price, Rate or Index	Date of Acquisition	Exchange or Counterparty	Cost/Option Premium	Book Value	*	Statement Value	Fair Value	Year to Date Increase / (Decrease) by Adjustment	Used to Adjust Basis of Hedged Item	Other Investment/ Miscellaneous Income

NONE

SCHEDULE DB - PART B - SECTION 1

Showing all Options, Caps, Floors and Insurance Futures Options Written and In-Force at Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14
Description	Number of Contracts or Notional Amount	Date of Maturity, Expiry, or Settlement	Strike Price, Rate or Index	Date of Issuance/ Purchase	Exchange or Counterparty	Consideration Received	Book Value	*	Statement Value	Fair Value	Year to Date Increase / (Decrease) by Adjustment	Used to Adjust Basis	Other Investment/ Miscellaneous Income

NONE

SCHEDULE DB - PART C - SECTION 1

Showing all Collar , Swap and Forwards Open at Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Description	Notional Amount	Date of Maturity , Expiry , or Settlement	Strike Price , Rate or Index Rec (Pay)	Date of Opening Position or Agreement	Exchange or Counterparty	Cost or (Consideration Received)	Book Value	*	Statement Value	Fair Value	Year to Date Increase (Decrease) by Adjustment	Used to Adjust Basis of Hedged Item	Other Investment/ Miscellaneous Income	Potential Exposure

NONE

SCHEDULE DB - PART D - SECTION 1

Showing all Futures Contracts and Insurance Futures Contracts at Current Statement Date

1	2	3	4	5	6	7	8	9	Variation Margin Information			13
Description	Number of Contracts	Maturity Date	Original Value	Current Value	Variation Margin	Date of Opening Position	Exchange or Counterparty	Cash Deposit	10 Recognized	11 Used to Adjust Basis of Hedged Item	12 Deferred	Potential Exposure

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository		2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
		Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	*
Name	Location and Supplemental Information					First Month	Second Month	Third Month	
Open Depositories									
SUNTRUST INVESTMENT .....	SUNTRUST BANK -TN .....					1,467,822	1,475,702	1,501,542	
REGIONS GENERAL OPERATING .....	REGIONS BANK -TN .....					2,797,519	1,064,971	3,264,248	
REGIONS CLAIMS .....	REGIONS BANK -TN .....					(3,960,782)	854,017	(1,664,731)	
REGIONS PAYROLL .....	REGIONS BANK -TN .....					2,084	3,425	1,712	
REGIONS ESCROW .....	REGIONS BANK -TN .....					30,742	87,451	87,697	
REGIONS TRUST .....	REGIONS BANK -TN .....					2,048,491	2,072,108	2,150,909	
0199999 - TOTAL - Open Depositories .....						2,385,876	5,557,674	5,341,377	
0399999 - TOTAL Cash on Deposit .....						2,385,876	5,557,674	5,341,377	
0499999 - Cash in Company's Office .....						500	500	500	
0599999 - TOTALS .....						2,386,376	5,558,174	5,341,877	

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book / Adjusted Carrying Value	Amount of Interest Due and Accrued	Gross Investment Income

NONE

STATEMENT AS OF June 30, 2007 OF THE MEMPHIS MANAGED CARE CORP.

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Non Admitted'	Admitted

NONE

STATEMENT AS OF June 30, 2007 OF THE MEMPHIS MANAGED CARE CORP.

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Non Admitted	7 Admitted
0199999 Pharmaceutical Rebate Receivables						
0299999 Claim Overpayment Receivables	36,610	93,336	132	830,092	830,092	130,077
0399999 Loans and Advances to Providers			48,604	90,000	90,000	48,604
0499999 Capitation Arranngement Receivables						
0599999 Risk Sharing Receivables						
0699999 Other Receivables				8,650	8,650	-
0799999 Gross Health Care Receivables	36,610	93,336	48,736	928,742	928,742	178,681

STATEMENT AS OF June 30, 2007 OF THE MEMPHIS MANAGED CARE CORP.

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Non Admitted'	Admitted	
						7 Current	8 Non-Current
Med-MRI	0	0	0	0	0	0	0
Medplex	0	0	0	3,000	3,000	0	0
The Health Loop	0	0	0	0	0	0	0
Midsouth Health Solutions	258,202	287,746	0	0	0	258,202	287,746
01999999 Individual Listed Receivables	258,202	287,746	0	3,000	3,000	258,202	287,746
02999999 Receivables Not individually Listed							
03999999 Total Gross amounts Receivable	258,202	287,746	0	3,000	3,000	258,202	287,746

Memphis Managed Care Inc.  
Reconciliation of Medical Services Monitoring Report (MSMR)  
to Report 2A  
As of June 30, 2007

<u>MSMR REPORT</u>	
UB 92 Payments	65,025,222
HCFA 1500 Payments	<u>45,821,576</u>
Total Claim Payments	<b>110,846,798</b>
No Check Adjustments	
Capitation	6,354,354
Reinsurance	
Off Lag Adjustments	1,610,792
IBNR	42,604,287
COB Subro Adjustments	
<b>Total Medical Payments</b>	<b>161,416,231</b>



Report #2A: TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

	Current Year		Previous Year
	Current Period	Year to Date Total	Total
Member Months	502,402	1,005,539	2,246,795
<b>REVENUES:</b>			
1 TennCare Capitation	118,791,710	206,695,896	373,474,597
2 Investment	293,243	570,060	1,313,408
3 Other Revenue	(6,264)	1,279	53,226
4 Total Revenue	119,078,690	207,267,234	374,841,231
<b>EXPENSES:</b>			
Medical and Hospital Services			
5 Capitated Physician Services	2,801,878	5,564,206	12,172,604
6 Fee for Service Physician Services	10,890,679	20,711,961	39,294,873
7 Inpatient Hospital Services	15,362,039	29,188,464	56,586,552
8 Outpatient Services	1,025,939	1,050,885	85,315
9 Emergency Room Services	6,470,549	13,166,832	24,010,446
10 Mental Health Services	5,057	7,550	24,488
11 Dental Services	53,234	53,234	0
12 Vision Services	501,831	1,064,476	2,118,889
13 Pharmacy Services	0	0	(255)
14 Home Health Services	2,330,079	4,230,315	6,529,248
15 Chiropractic Services	0	0	0
16 Radiology Services	4,473,540	5,015,523	1,521,329
17 Laboratory Services	2,339,329	4,743,594	8,432,875
18 Durable Medical Equipment Services	225,054	297,355	298,038
19 Transportation Services	357,371	931,865	3,802,540
20 Outside Referrals	0	0	0
21 Medical incentive Pool and Withhold Adjustments	0	0	0
22 Occupancy Depreciation and Amortization	0	0	0
23 Other Medical and Hospital Services	27,870,818	66,523,278	151,258,715
24 <b>IBNR</b>	38,302,560	42,604,287	35,904,045
25 <b>Subtotal</b>	<b>113,009,956</b>	<b>195,153,825</b>	<b>342,039,702</b>
26 Reinsurance Expense Net of Recoveries	0	0	0
<b>LESS:</b>			
27 Copayments	0	0	0
28 Subrogation			0
29 Coordination of Benefits			0
30 <b>Subtotal</b>	0	0	0
<b>30 TOTAL MEDICAL, HOSPITAL &amp; IBNR</b>	<b>113,009,956</b>	<b>195,153,825</b>	<b>342,039,702</b>
<b>Administration</b>			
31 Compensation	2,110,752	4,157,232	8,510,052
32 Marketing	(2,900)	0	0
33 Interest Expense	0	0	92
34 Premium Tax Expense	1,651,456	3,507,232	6,514,857
35 Occupancy Depreciation and Amortization	183,577	362,277	598,436
36 Other Administration	1,032,151	1,830,613	8,948,701
<b>37 TOTAL ADMINISTRATION</b>	<b>4,975,035</b>	<b>9,857,354</b>	<b>24,572,138</b>
<b>38 TOTAL EXPENSES</b>	<b>117,984,992</b>	<b>205,011,179</b>	<b>366,611,840</b>
<b>39 NET INCOME (LOSS)</b>	1,093,698	2,256,055	8,229,391

EXHIBIT "A"

Calculation As of 6-2007		
Total Administrative & OH Allocations		
	9,857,353.93	
4130	ASO Revenue	(11,513,263.99)
4120	State Capitation Revenue	0.00
4210	State Bonus Payment	(28,805.65)
4150	Equity In Profit (Loss) of MHS	2,724.00
4910	Other Revenue	(4,002.50)
160		(1,128,073.93)
120		(498,830.08)
170		(503,158.06)
190		(232,883.74)
		(2,362,945.81)
		Claims Expense
	(4,048,940.02)	Total Admin Expense
	2,362,945.81	Claims Expense
	(1,685,994.21)	Total Underwriting Deductions

Calculation As of 6-2006		
Total Administrative & OH Allocations		
	8,838,508.13	
ASO Revenue	(12,056,172.69)	
State Capitation Revenue	(25,809.24)	
Equity In Profit (Loss) of MHS	64,561.00	
Subrogation Revenue	0.00	
Other Revenue		
160	(1,136,886.21)	
120	(486,113.91)	
170	(473,228.00)	
190	(215,423.44)	(2,311,651.56)
		Claims Expense
	(5,490,564.36)	Total Admin Expense
	2,311,651.56	Claims Expense
	(3,178,912.80)	Total Underwriting Deductions

Variances	2007	2006	
	628,022.22	62,731.39	Legal
1,018,845.80	1,136,618.70	984,334.38	Prof. Service
	1,764,640.92	1,047,065.77	
Our Biggest Difference in Variances			
(474,072.79) Amount Less than Last Year's Revenue Amount			

**Note:** We received \$474,072.79 Less in Revenue as compared to the same quarter in 2006 and our expenses for Legal and Prof. Services have almost Doubled.

MMCC  
CASH FLOW  
EXHIBIT "B"

Raw Number	Discription	Beg Bal	Net Change	Ending Bal		
0-000-1010-000	Cash - Petty	\$600.00	(\$100.00)	\$500.00		
0-000-1040-000	Investment Account - Suntrust	\$1,007,360.10	\$494,181.80	\$1,501,541.90		
0-000-1060-000	Cash - General Operating Regions B	(\$1,089,344.94)	\$4,353,592.72	\$3,264,247.78		
0-000-1070-000	Cash - Claims Account Regions Bank	\$1,785,192.03	(\$3,449,922.79)	(\$1,664,730.76)		
0-000-1080-000	Cash - Payroll Account Regions Banl	\$1,177.27	\$535.03	\$1,712.30		
0-000-1101-000	Escrow Account	\$11,482.29	\$76,214.28	\$87,696.57		
0-000-1105-000	Investment Account - Regions Bank	\$3,931,997.09	(\$1,781,088.15)	\$2,150,908.94		
	CASH NET CHANGE		(306,587.11)			
0-000-1102-000	Escrow Interest Receivable	\$217,686.30	\$9,233.67	\$226,919.97		
0-000-4310-000	Interest Income	\$0.00	(\$570,059.67)	(\$570,059.67)		
	NET INTEREST INCOME		(560,826.00)		560,826.00	Line # 2= 560,826.00 Line # 3= 4,002.50
0-000-4910-000	Gain/Loss on Sale Assets	\$0.00	(\$4,002.50)	(\$4,002.50)		
	MISC INCOME		(4,002.50)		4,002.50	
0-000-1210-000	A/R - Tenncare - Capitation	\$4,709,517.36	\$1,727,951.38	\$6,437,468.74		Line # 7= (2,686,083.33) (4,914,735.65)
0-000-1410-000	A/R - Other	\$322,378.84	\$646,440.24	\$968,819.08		(7,600,818.98)
0-000-1415-000	A/R Intercompany	\$282,860.58	\$263,087.74	\$545,948.32		
0-000-1420-000	A/R - Affiliates	\$3,000.00	\$0.00	\$3,000.00		
0-000-1430-000	Provider Advances	\$90,000.00	\$48,603.97	\$138,603.97		Line #12.1 (2,724.00) Change in MHS Investment 900,000.00 Proceeds from Disposal 1,358,486.14 Amortization of Bonds (1,486,342.00) Cost of Purchasing 769,420.14 Total change in Investments
	ASSETS		\$2,686,083.33		(2,686,083.33)	
0-000-1850-000	Less: Accumulated Depreciation	(\$7,422,431.65)	\$6,442,055.09	(\$980,376.56)		
0-000-2010-000	A/P - Trade Creditors	(\$2,862.49)	\$0.00	(\$2,862.49)		
0-000-2020-000	A/P - Intercompany	(\$192,695.34)	\$1,562.79	(\$191,132.55)		
0-000-2040-000	Other Accrued Liabilities	(\$180,557.88)	(\$292,816.12)	(\$473,374.00)		
0-000-2042-000	Employee - CASUAL DAY	(\$1,662.98)	(\$1,023.00)	(\$2,685.98)		Line # 16.6 5,959,983.23
0-000-2043-000	Employee - Garnish	(\$8,819.44)	(\$17,097.09)	(\$25,916.53)		
0-000-2044-000	Employee - FSA	(\$37,088.70)	\$61,815.77	\$24,727.07		(306,587.11) Total Change in Cash
0-000-2050-000	401 k	(\$5,175.90)	(\$113.76)	(\$5,289.66)		
0-000-2400-000	Claims Advance Payable	(\$1,349,430.59)	\$290,982.38	(\$1,058,448.21)		
0-000-2510-000	A/P - Ins Prem - Life	\$2,619.72	\$1,684.11	\$4,303.83		
0-000-2516-000	A/P-Employee Paid	\$2,933.20	\$282.00	\$3,215.20		
0-000-2520-000	Accrued FICA Employer/ee	(\$30.68)	\$0.05	(\$30.63)		
0-000-2530-000	Accrued Employee Wages	(\$194,893.00)	\$1,921.00	(\$192,972.00)		
0-000-2535-000	Accrued Payroll Taxes	(\$13,375.00)	(\$708.00)	(\$14,083.00)		
0-000-2540-000	Accrued Vacation Pay	(\$267,233.50)	\$44,448.22	(\$222,785.28)		
0-000-2545-000	Accrued Bonus Pool	(\$138,991.57)	\$63,733.92	(\$75,257.65)		
0-000-4130-000	ASO Revenue	\$0.00	(\$11,513,263.99)	(\$11,513,263.99)		
0-000-4150-000	Equity in Profit (Loss) of MHS	\$0.00	\$2,724.00	\$2,724.00		
0-000-4210-000	State Bonus Payment	\$0.00	(\$28,805.65)	(\$28,805.65)		
0-000-5005-000	NON PAR IP ACUTE CARE ICU/CCI	\$0.00	\$76,368.00	\$76,368.00		
0-000-5015-000	PAR IP ACUTE CARE ICU/CCU	\$0.00	\$10,828,048.34	\$10,828,048.34		
0-000-5035-000	PAR IP ACUTE CARE NICU	\$0.00	\$981.00	\$981.00		
0-000-5045-000	NON PAR IP A/C MAT/NURSERY	\$0.00	\$287,292.71	\$287,292.71		
0-000-5055-000	PAR IP A/C MATERNITY/NURSERY	\$0.00	\$6,019,670.35	\$6,019,670.35		
0-000-5075-000	PAR IP A/C MH/SUBS ABUSE	\$0.00	\$21,616.29	\$21,616.29		
0-000-5085-000	NON PAR IP ACUTE CARE SURGIC	\$0.00	\$640,303.16	\$640,303.16		
0-000-5095-000	PAR IP ACUTE CARE SURGICAL	\$0.00	\$4,590,260.50	\$4,590,260.50		
0-000-5125-000	NON PAR IP ACUTE CARE OTHER	\$0.00	\$105,805.60	\$105,805.60		
0-000-5135-000	PAR IP ACUTE CARE OTHER	\$0.00	\$6,618,118.39	\$6,618,118.39		
0-000-5146-000	Hospital Clearing ACCT -ASO	\$0.00	(\$29,570,684.35)	(\$29,570,684.35)		
0-000-5505-000	PCP SERVICES	\$0.00	\$6,436,190.40	\$6,436,190.40		
0-000-5515-000	ANESTHESIOLOGY NON PAR SPE	\$0.00	\$9,821.62	\$9,821.62		
0-000-5525-000	ANESTHESIOLOGY PAR SPECIALI	\$0.00	\$723,550.12	\$723,550.12		
0-000-5535-000	CARDIOLOGY NON PAR SPECIALI	\$0.00	\$51,003.91	\$51,003.91		
0-000-5545-000	CARDIOLOGY PAR SPECIALIST	\$0.00	\$346,042.99	\$346,042.99		
0-000-5555-000	GENERAL SURGERY NON PAR SP	\$0.00	\$29,029.99	\$29,029.99		
0-000-5565-000	GENERAL SURGERY PAR SPECIA	\$0.00	\$263,938.52	\$263,938.52		
0-000-5595-000	OB-GYNECOLOGY NON PAR SPEC	\$0.00	\$564,563.51	\$564,563.51		
0-000-5605-000	OB-GYNECOLOGY PAR SPECIALI	\$0.00	\$460,102.98	\$460,102.98		
0-000-5615-000	ORTHOPEDIC SURGERY NON PAR	\$0.00	\$13,007.00	\$13,007.00		
0-000-5625-000	ORTHOPEDIC SURGERY PAR SPE	\$0.00	\$59,680.68	\$59,680.68		
0-000-5635-000	DIAGNOSTIC RADIOLOGY NON PA	\$0.00	\$134,420.00	\$134,420.00		
0-000-5665-000	DIAGNOSTIC RADIOLOGY PAR SP	\$0.00	\$1,289,225.44	\$1,289,225.44		
0-000-5670-000	Transportation Services	\$0.00	\$760.00	\$760.00		
0-000-5675-000	RADIOLOGIST/ONCOLOGIST NON	\$0.00	\$8,185.94	\$8,185.94		
0-000-5685-000	RADIOLOGIST/ONCOLOGIST NON	\$0.00	\$2,461.89	\$2,461.89		
0-000-5695-000	SPECIALTY CARE OTHER PAR	\$0.00	\$10,000,242.15	\$10,000,242.15		
0-000-5705-000	SPECIALTY CARE OTHER NON PA	\$0.00	\$319,733.74	\$319,733.74		
0-000-5716-000	Physician Clearing Acct FFS - ASO	\$0.00	(\$56,170,488.00)	(\$56,170,488.00)		
0-000-6005-000	PCCM CAPITATION	\$0.00	\$677,398.09	\$677,398.09		
0-000-6015-000	SPECIALTY CAP	\$0.00	\$3,359,241.17	\$3,359,241.17		
0-000-6025-000	ANCILARY CAP	\$0.00	\$1,527,566.36	\$1,527,566.36		
0-000-6026-000	Other Health Care Clearing Acct Cap	\$0.00	(\$1,527,566.36)	(\$1,527,566.36)		
0-000-6036-000	Physician Clearing Acct Cap - ASO	\$0.00	(\$3,038,682.26)	(\$3,038,682.26)		
0-000-6505-000	NON PAR OP HOSPITAL RADIOLO	\$0.00	\$388.13	\$388.13		
0-000-6515-000	PAR OP HOSPITAL RADIOLOGY	\$0.00	\$5,013,306.07	\$5,013,306.07		
0-000-6535-000	PAR FREE STANDING RADIOLOGY	\$0.00	\$1,829.29	\$1,829.29		
0-000-6545-000	NON PAR OP HOSP LAB/PATH	\$0.00	\$2,256.65	\$2,256.65		
0-000-6555-000	PAR OP HOSP LAB/PATHOLOGY	\$0.00	\$3,119,817.30	\$3,119,817.30		
0-000-6565-000	NON PAR FREE STANDING LAB/P	\$0.00	\$5,246.57	\$5,246.57		
0-000-6585-000	NON PAR OP HOSP DIAG TESTING	\$0.00	\$927.30	\$927.30		
0-000-6595-000	PAR OP HOSP DIAG TESTING	\$0.00	\$1,615,345.81	\$1,615,345.81		
0-000-6605-000	NON PAR OP HOSPITAL SURGICA	\$0.00	\$26,601.49	\$26,601.49		
0-000-6615-000	PAR OP HOSPITAL SURGICAL	\$0.00	\$1,024,283.79	\$1,024,283.79		
0-000-6635-000	PAR FREE STANDING SURGICAL	\$0.00	(\$3,828.45)	(\$3,828.45)		
0-000-6655-000	PAR TREATMENT/OBSERVATION I	\$0.00	\$374.13	\$374.13		
0-000-6665-000	NON PAR DME	\$0.00	(\$14,951.24)	(\$14,951.24)		
0-000-6675-000	PAR DME	\$0.00	\$312,306.58	\$312,306.58		
0-000-6685-000	NON PAR HOME HEALTH CARE	\$0.00	\$3,583,186.63	\$3,583,186.63		
0-000-6695-000	PAR HOME HEALTH CARE	\$0.00	\$647,128.63	\$647,128.63		
0-000-6705-000	NON PAR VISION	\$0.00	\$121.00	\$121.00		
0-000-6715-000	PAR VISION	\$0.00	\$1,064,355.23	\$1,064,355.23		
0-000-6725-000	NON PAR OP MENTAL HEALTH	\$0.00	\$3,190.96	\$3,190.96		
0-000-6735-000	PAR OP MENTAL HEALTH	\$0.00	\$4,358.74	\$4,358.74		
0-000-6745-000	NON PAR TRANSPORTATION	\$0.00	\$931,864.96	\$931,864.96		
0-000-6755-000	NON PAR DENTAL SERVICES	\$0.00	\$3,512.13	\$3,512.13		
0-000-6765-000	PAR DENTAL SERVICES	\$0.00	\$49,721.97	\$49,721.97		
0-000-6775-000	NON PAR OP PHY/SPEECH/OCC T	\$0.00	\$1,659.16	\$1,659.16		
0-000-6785-000	PAR OP PHY/SPEECH/OCC THPY	\$0.00	\$281,049.53	\$281,049.53		
0-000-6795-000	OTHER HEALTH CARE PAR	\$0.00	\$64,627,403.51	\$64,627,403.51		
0-000-6805-000	OTHER HEALTH CARE NON PAR	\$0.00	\$1,079,426.54	\$1,079,426.54		
0-000-6815-000	NON PAR EMERGENCY ROOM	\$0.00	\$606,197.14	\$606,197.14		
0-000-6825-000	PAR EMERGENCY ROOM	\$0.00	\$12,560,634.36	\$12,560,634.36		
0-000-6835-000	Case Management	\$0.00	\$537,194.28	\$537,194.28		
0-000-6836-000	Other Health Care FFS Clearing Acct	\$0.00	(\$62,242,118.06)	(\$62,242,118.06)		
0-000-7030-000	Salaries & Wages	\$0.00	\$117.20	\$117.20		
0-000-9020-000	Premium Tax	\$0.00	\$3,507,232.01	\$3,507,232.01		
0-000-9021-000	Premium Tax Clearing	\$0.00	(\$3,507,232.01)	(\$3,507,232.01)		
0-000-9040-000	Disease Mgmt Expense	\$0.00	\$468,344.72	\$468,344.72		
0-000-9070-000	MED CALL Expense	\$0.00	\$140,776.16	\$140,776.16		
0-000-9080-000	Corporate Overhead Allocation MHS	\$0.00	(\$476,308.80)	(\$476,308.80)		
0-110-7030-000	Salaries & Wages	\$0.00	\$77,493.59	\$77,493.59		
0-110-7040-000	Overtime Wages	\$0.00	\$70.48	\$70.48		
0-110-7110-000	Payroll Taxes	\$0.00	\$7,474.54	\$7,474.54		
0-110-7130-000	Employee-Medical Insurance	\$0.00	\$5,193.43	\$5,193.43		
0-110-7131-000	Employee-HRA	\$0.00	\$529.80	\$529.80		
0-110-7132-000	Employee-Wellness	\$0.00	\$56.45	\$56.45		
0-110-7133-000	Employee-Pharmacy	\$0.00	\$3,106.15	\$3,106.15		
0-110-7134-000	Employee-Dental Insurance	\$0.00	\$859.91	\$859.91		
0-110-7135-000	Employee-401K Match	\$0.00	\$1,044.01	\$1,044.01		
0-110-7140-000	Employee-Disability Insurance	\$0.00	\$99.36	\$99.36		
0-110-7150-000	Employee-Life Insurance	\$0.00	\$1,581.98	\$1,581.98		
0-110-7230-000	Professional Services	\$0.00	\$42,862.50	\$42,862.50		

MMCC  
CASH FLOW  
EXHIBIT "B"

Raw Number	Discription	Beg Bal	Net Change	Ending Bal
0-110-7270-000	Temporary Help	\$0.00	\$4,785.40	\$4,785.40
0-110-7310-000	Office Supplies & Stat	\$0.00	\$2,071.81	\$2,071.81
0-110-7320-000	Postage	\$0.00	\$235.56	\$235.56
0-110-7360-000	Printing	\$0.00	\$6,241.44	\$6,241.44
0-110-7370-000	Food And Beverage	\$0.00	\$273.65	\$273.65
0-110-7410-000	Rent	\$0.00	\$6,258.54	\$6,258.54
0-110-7430-000	Maintenance & Repairs & Leases	\$0.00	\$23.99	\$23.99
0-110-7610-000	Staff Dev & Training	\$0.00	\$3,939.98	\$3,939.98
0-110-7620-000	Staff Travel	\$0.00	\$4,228.47	\$4,228.47
0-110-7621-000	Mileage	\$0.00	\$436.60	\$436.60
0-110-7623-000	Parking	\$0.00	\$140.00	\$140.00
0-110-7909-000	Business Entertainment & Donations	\$0.00	\$2,166.21	\$2,166.21
0-110-7920-000	Dues, Memberships & Subs	\$0.00	\$2,690.93	\$2,690.93
0-110-7921-000	Liscensing	\$0.00	\$4,584.98	\$4,584.98
0-110-7970-000	Telephone & Telegraph	\$0.00	\$139.19	\$139.19
0-120-7030-000	Salaries & Wages	\$0.00	\$383,269.30	\$383,269.30
0-120-7040-000	Overtime Wages	\$0.00	\$5.21	\$5.21
0-120-7110-000	Payroll Taxes	\$0.00	\$31,398.70	\$31,398.70
0-120-7130-000	Employee-Medical Insurance	\$0.00	\$24,278.39	\$24,278.39
0-120-7131-000	Employee-HRA	\$0.00	\$3,768.59	\$3,768.59
0-120-7132-000	Employee-Wellness	\$0.00	(\$21.68)	(\$21.68)
0-120-7133-000	Employee-Pharmacy	\$0.00	\$10,280.60	\$10,280.60
0-120-7134-000	Employee-Dental Insurance	\$0.00	\$2,398.94	\$2,398.94
0-120-7135-000	Employee-401K Match	\$0.00	\$7,667.34	\$7,667.34
0-120-7140-000	Employee-Disability Insurance	\$0.00	\$198.76	\$198.76
0-120-7150-000	Employee-Life Insurance	\$0.00	\$5,147.32	\$5,147.32
0-120-7310-000	Office Supplies & Stat	\$0.00	\$2,956.28	\$2,956.28
0-120-7320-000	Postage	\$0.00	\$629.01	\$629.01
0-120-7360-000	Printing	\$0.00	\$42.61	\$42.61
0-120-7370-000	Food And Beverage	\$0.00	\$906.25	\$906.25
0-120-7410-000	Rent	\$0.00	\$19,553.58	\$19,553.58
0-120-7430-000	Maintenance & Repairs & Leases	\$0.00	\$140.33	\$140.33
0-120-7610-000	Staff Dev & Training	\$0.00	\$878.00	\$878.00
0-120-7620-000	Staff Travel	\$0.00	\$1,284.24	\$1,284.24
0-120-7621-000	Mileage	\$0.00	\$1,702.89	\$1,702.89
0-120-7623-000	Parking	\$0.00	\$185.00	\$185.00
0-120-7671-000	Employee Events	\$0.00	\$150.00	\$150.00
0-120-7970-000	Telephone & Telegraph	\$0.00	\$2,010.42	\$2,010.42
0-130-7030-000	Salaries & Wages	\$0.00	\$120,008.64	\$120,008.64
0-130-7040-000	Overtime Wages	\$0.00	\$394.52	\$394.52
0-130-7110-000	Payroll Taxes	\$0.00	\$9,808.42	\$9,808.42
0-130-7130-000	Employee-Medical Insurance	\$0.00	\$9,233.37	\$9,233.37
0-130-7131-000	Employee-HRA	\$0.00	\$2,119.04	\$2,119.04
0-130-7132-000	Employee-Wellness	\$0.00	(\$125.68)	(\$125.68)
0-130-7133-000	Employee-Pharmacy	\$0.00	\$4,531.56	\$4,531.56
0-130-7134-000	Employee-Dental Insurance	\$0.00	\$886.41	\$886.41
0-130-7135-000	Employee-401K Match	\$0.00	\$1,001.41	\$1,001.41
0-130-7140-000	Employee-Disability Insurance	\$0.00	\$196.06	\$196.06
0-130-7150-000	Employee-Life Insurance	\$0.00	\$1,805.01	\$1,805.01
0-130-7230-000	Professional Services	\$0.00	\$1,303.55	\$1,303.55
0-130-7270-000	Temporary Help	\$0.00	\$5,587.43	\$5,587.43
0-130-7310-000	Office Supplies & Stat	\$0.00	\$2,231.63	\$2,231.63
0-130-7320-000	Postage	\$0.00	\$12,176.34	\$12,176.34
0-130-7360-000	Printing	\$0.00	\$21,317.46	\$21,317.46
0-130-7370-000	Food And Beverage	\$0.00	\$509.01	\$509.01
0-130-7410-000	Rent	\$0.00	\$9,899.98	\$9,899.98
0-130-7415-000	Outside Storage Cost	\$0.00	\$149.44	\$149.44
0-130-7430-000	Maintenance & Repairs & Leases	\$0.00	\$100.46	\$100.46
0-130-7510-000	Leased Equipment	\$0.00	\$1,300.08	\$1,300.08
0-130-7610-000	Staff Dev & Training	\$0.00	\$203.25	\$203.25
0-130-7621-000	Mileage	\$0.00	\$10,460.55	\$10,460.55
0-130-7623-000	Parking	\$0.00	\$7.00	\$7.00
0-130-7671-000	Employee Events	\$0.00	\$104.98	\$104.98
0-130-7909-000	Business Entertainment & Donations	\$0.00	\$172.64	\$172.64
0-130-7920-000	Dues, Memberships & Subs	\$0.00	\$160.00	\$160.00
0-130-7970-000	Telephone & Telegraph	\$0.00	\$900.95	\$900.95
0-140-7030-000	Salaries & Wages	\$0.00	\$334,975.34	\$334,975.34
0-140-7040-000	Overtime Wages	\$0.00	\$192.61	\$192.61
0-140-7110-000	Payroll Taxes	\$0.00	\$28,084.39	\$28,084.39
0-140-7130-000	Employee-Medical Insurance	\$0.00	\$34,817.50	\$34,817.50
0-140-7131-000	Employee-HRA	\$0.00	\$7,289.81	\$7,289.81
0-140-7132-000	Employee-Wellness	\$0.00	\$221.64	\$221.64
0-140-7133-000	Employee-Pharmacy	\$0.00	\$14,863.40	\$14,863.40
0-140-7134-000	Employee-Dental Insurance	\$0.00	\$3,184.10	\$3,184.10
0-140-7135-000	Employee-401K Match	\$0.00	\$2,948.40	\$2,948.40
0-140-7140-000	Employee-Disability Insurance	\$0.00	(\$527.88)	(\$527.88)
0-140-7150-000	Employee-Life Insurance	\$0.00	\$6,467.45	\$6,467.45
0-140-7230-000	Professional Services	\$0.00	\$83,038.92	\$83,038.92
0-140-7270-000	Temporary Help	\$0.00	\$2,571.54	\$2,571.54
0-140-7310-000	Office Supplies & Stat	\$0.00	\$2,941.99	\$2,941.99
0-140-7320-000	Postage	\$0.00	\$64,491.59	\$64,491.59
0-140-7360-000	Printing	\$0.00	\$144,889.11	\$144,889.11
0-140-7370-000	Food And Beverage	\$0.00	\$1,386.39	\$1,386.39
0-140-7410-000	Rent	\$0.00	\$30,100.34	\$30,100.34
0-140-7415-000	Outside Storage Cost	\$0.00	\$43.17	\$43.17
0-140-7430-000	Maintenance & Repairs & Leases	\$0.00	\$23,644.00	\$23,644.00
0-140-7671-000	Employee Events	\$0.00	\$324.53	\$324.53
0-140-7970-000	Telephone & Telegraph	\$0.00	\$709.91	\$709.91
0-150-7030-000	Salaries & Wages	\$0.00	\$191,783.96	\$191,783.96
0-150-7110-000	Payroll Taxes	\$0.00	\$16,124.08	\$16,124.08
0-150-7130-000	Employee-Medical Insurance	\$0.00	\$9,924.10	\$9,924.10
0-150-7131-000	Employee-HRA	\$0.00	\$4,758.82	\$4,758.82
0-150-7132-000	Employee-Wellness	\$0.00	(\$9.00)	(\$9.00)
0-150-7133-000	Employee-Pharmacy	\$0.00	\$4,484.96	\$4,484.96
0-150-7134-000	Employee-Dental Insurance	\$0.00	\$732.54	\$732.54
0-150-7135-000	Employee-401K Match	\$0.00	\$2,386.41	\$2,386.41
0-150-7140-000	Employee-Disability Insurance	\$0.00	(\$65.96)	(\$65.96)
0-150-7150-000	Employee-Life Insurance	\$0.00	\$1,521.45	\$1,521.45
0-150-7220-000	Legal Services	\$0.00	\$34,000.00	\$34,000.00
0-150-7270-000	Temporary Help	\$0.00	\$91.62	\$91.62
0-150-7310-000	Office Supplies & Stat	\$0.00	\$1,877.91	\$1,877.91
0-150-7320-000	Postage	\$0.00	\$3.71	\$3.71
0-150-7370-000	Food And Beverage	\$0.00	\$380.08	\$380.08
0-150-7410-000	Rent	\$0.00	\$6,150.29	\$6,150.29
0-150-7430-000	Maintenance & Repairs & Leases	\$0.00	\$47.04	\$47.04
0-150-7610-000	Staff Dev & Training	\$0.00	\$2,417.70	\$2,417.70
0-150-7620-000	Staff Travel	\$0.00	\$2,788.18	\$2,788.18
0-150-7621-000	Mileage	\$0.00	\$146.96	\$146.96
0-150-7623-000	Parking	\$0.00	\$4.00	\$4.00
0-150-7920-000	Dues, Memberships & Subs	\$0.00	\$144.00	\$144.00
0-150-7921-000	Liscensing	\$0.00	\$4,169.53	\$4,169.53
0-150-7970-000	Telephone & Telegraph	\$0.00	\$529.40	\$529.40
0-160-7030-000	Salaries & Wages	\$0.00	\$629,240.52	\$629,240.52
0-160-7040-000	Overtime Wages	\$0.00	\$21,739.04	\$21,739.04
0-160-7110-000	Payroll Taxes	\$0.00	\$53,608.51	\$53,608.51
0-160-7130-000	Employee-Medical Insurance	\$0.00	\$75,731.95	\$75,731.95
0-160-7131-000	Employee-HRA	\$0.00	\$13,603.40	\$13,603.40
0-160-7132-000	Employee-Wellness	\$0.00	\$154.48	\$154.48
0-160-7133-000	Employee-Pharmacy	\$0.00	\$31,610.19	\$31,610.19
0-160-7134-000	Employee-Dental Insurance	\$0.00	\$5,608.13	\$5,608.13
0-160-7135-000	Employee-401K Match	\$0.00	\$6,887.97	\$6,887.97
0-160-7140-000	Employee-Disability Insurance	\$0.00	\$1,122.19	\$1,122.19
0-160-7150-000	Employee-Life Insurance	\$0.00	\$10,228.35	\$10,228.35
0-160-7230-000	Professional Services	\$0.00	\$81,304.02	\$81,304.02
0-160-7270-000	Temporary Help	\$0.00	\$14,668.27	\$14,668.27
0-160-7310-000	Office Supplies & Stat	\$0.00	\$7,736.75	\$7,736.75
0-160-7320-000	Postage	\$0.00	\$6,975.44	\$6,975.44
0-160-7370-000	Food And Beverage	\$0.00	\$2,781.54	\$2,781.54
0-160-7410-000	Rent	\$0.00	\$62,875.98	\$62,875.98
0-160-7415-000	Outside Storage Cost	\$0.00	\$4,248.51	\$4,248.51
0-160-7430-000	Maintenance & Repairs & Leases	\$0.00	\$19,231.97	\$19,231.97
0-160-7671-000	Employee Events	\$0.00	\$114.52	\$114.52

MMCC  
CASH FLOW  
EXHIBIT "B"

Raw Number	Discription	Beg Bal	Net Change	Ending Bal
0-160-7921-000	Licensing	\$0.00	\$76,989.06	\$76,989.06
0-160-7970-000	Telephone & Telegraph	\$0.00	\$1,613.14	\$1,613.14
0-170-7030-000	Salaries & Wages	\$0.00	\$297,393.03	\$297,393.03
0-170-7040-000	Overtime Wages	\$0.00	\$149.87	\$149.87
0-170-7110-000	Payroll Taxes	\$0.00	\$24,442.92	\$24,442.92
0-170-7130-000	Employee-Medical Insurance	\$0.00	\$22,135.05	\$22,135.05
0-170-7131-000	Employee-HRA	\$0.00	\$14,869.38	\$14,869.38
0-170-7132-000	Employee-Wellness	\$0.00	\$4.32	\$4.32
0-170-7133-000	Employee-Pharmacy	\$0.00	\$13,421.93	\$13,421.93
0-170-7134-000	Employee-Dental Insurance	\$0.00	\$2,390.38	\$2,390.38
0-170-7135-000	Employee-401K Match	\$0.00	\$2,128.23	\$2,128.23
0-170-7140-000	Employee-Disability Insurance	\$0.00	\$518.79	\$518.79
0-170-7150-000	Employee-Life Insurance	\$0.00	\$5,062.65	\$5,062.65
0-170-7310-000	Office Supplies & Stat	\$0.00	\$7,793.25	\$7,793.25
0-170-7320-000	Postage	\$0.00	\$6,785.04	\$6,785.04
0-170-7370-000	Food And Beverage	\$0.00	\$959.35	\$959.35
0-170-7410-000	Rent	\$0.00	\$20,300.09	\$20,300.09
0-170-7415-000	Outside Storage Cost	\$0.00	\$741.94	\$741.94
0-170-7430-000	Maintenance & Repairs & Leases	\$0.00	\$156.74	\$156.74
0-170-7671-000	Employee Events	\$0.00	\$189.19	\$189.19
0-170-7921-000	Licensing	\$0.00	\$82,924.87	\$82,924.87
0-170-7970-000	Telephone & Telegraph	\$0.00	\$791.04	\$791.04
0-190-7030-000	Salaries & Wages	\$0.00	\$162,636.46	\$162,636.46
0-190-7040-000	Overtime Wages	\$0.00	\$14.35	\$14.35
0-190-7110-000	Payroll Taxes	\$0.00	\$13,895.11	\$13,895.11
0-190-7130-000	Employee-Medical Insurance	\$0.00	\$9,328.11	\$9,328.11
0-190-7131-000	Employee-HRA	\$0.00	\$3,904.83	\$3,904.83
0-190-7132-000	Employee-Wellness	\$0.00	\$9.32	\$9.32
0-190-7133-000	Employee-Pharmacy	\$0.00	\$4,329.88	\$4,329.88
0-190-7134-000	Employee-Dental Insurance	\$0.00	\$570.87	\$570.87
0-190-7135-000	Employee-401K Match	\$0.00	\$3,815.97	\$3,815.97
0-190-7140-000	Employee-Disability Insurance	\$0.00	\$778.48	\$778.48
0-190-7150-000	Employee-Life Insurance	\$0.00	\$2,011.22	\$2,011.22
0-190-7310-000	Office Supplies & Stat	\$0.00	\$2,878.54	\$2,878.54
0-190-7320-000	Postage	\$0.00	\$448.92	\$448.92
0-190-7360-000	Printing	\$0.00	\$276.45	\$276.45
0-190-7370-000	Food and Beverage	\$0.00	\$33.90	\$33.90
0-190-7410-000	Rent	\$0.00	\$9,703.32	\$9,703.32
0-190-7420-000	Utilities	\$0.00	\$1,116.27	\$1,116.27
0-190-7430-000	Maintenance & Repairs & Leases	\$0.00	\$3,801.11	\$3,801.11
0-190-7510-000	Leased Equipment	\$0.00	\$56.79	\$56.79
0-190-7610-000	Staff Dev & Training	\$0.00	\$1,870.00	\$1,870.00
0-190-7620-000	Staff Travel	\$0.00	\$45.00	\$45.00
0-190-7621-000	Mileage	\$0.00	\$10,275.65	\$10,275.65
0-190-7623-000	Parking	\$0.00	\$4.00	\$4.00
0-190-7671-000	Employee Events	\$0.00	\$251.56	\$251.56
0-190-7920-000	Dues, Memberships & Subs	\$0.00	\$25.00	\$25.00
0-190-7922-000	Property Tax	\$0.00	\$63.05	\$63.05
0-190-7970-000	Telephone & Telegraph	\$0.00	\$739.58	\$739.58
0-200-7030-000	Salaries & Wages	\$0.00	\$258,047.86	\$258,047.86
0-200-7040-000	Overtime Wages	\$0.00	\$35.00	\$35.00
0-200-7110-000	Payroll Taxes	\$0.00	\$21,702.46	\$21,702.46
0-200-7130-000	Employee-Medical Insurance	\$0.00	\$19,071.03	\$19,071.03
0-200-7131-000	Employee-HRA	\$0.00	\$3,884.25	\$3,884.25
0-200-7132-000	Employee-Wellness	\$0.00	\$8.82	\$8.82
0-200-7133-000	Employee-Pharmacy	\$0.00	\$7,792.48	\$7,792.48
0-200-7134-000	Employee-Dental Insurance	\$0.00	\$1,159.67	\$1,159.67
0-200-7135-000	Employee-401K Match	\$0.00	\$5,001.17	\$5,001.17
0-200-7140-000	Employee-Disability Insurance	\$0.00	\$425.03	\$425.03
0-200-7150-000	Employee-Life Insurance	\$0.00	\$3,770.84	\$3,770.84
0-200-7230-000	Professional Services	\$0.00	\$26,941.43	\$26,941.43
0-200-7270-000	Temporary Help	\$0.00	\$4,195.19	\$4,195.19
0-200-7310-000	Office Supplies & Stat	\$0.00	\$5,311.87	\$5,311.87
0-200-7320-000	Postage	\$0.00	\$19,318.25	\$19,318.25
0-200-7360-000	Printing	\$0.00	\$145.99	\$145.99
0-200-7370-000	Food And Beverage	\$0.00	\$685.94	\$685.94
0-200-7410-000	Rent	\$0.00	\$15,908.47	\$15,908.47
0-200-7430-000	Maintenance & Repairs & Leases	\$0.00	\$77.28	\$77.28
0-200-7610-000	Staff Dev & Training	\$0.00	\$88.59	\$88.59
0-200-7620-000	Staff Travel	\$0.00	\$762.00	\$762.00
0-200-7621-000	Mileage	\$0.00	\$9,909.50	\$9,909.50
0-200-7623-000	Parking	\$0.00	\$15.00	\$15.00
0-200-7665-000	EPSDT	\$0.00	\$93,977.59	\$93,977.59
0-200-7909-000	Business Entertainment & Donations	\$0.00	\$244.03	\$244.03
0-200-7920-000	Dues, Memberships & Subs	\$0.00	\$510.00	\$510.00
0-200-7921-000	Licensing	\$0.00	\$78,239.67	\$78,239.67
0-200-7970-000	Telephone & Telegraph	\$0.00	\$951.22	\$951.22
0-210-7030-000	Salaries & Wages	\$0.00	\$557,342.80	\$557,342.80
0-210-7035-000	Bonus Accrual	\$0.00	\$60,000.00	\$60,000.00
0-210-7110-000	Payroll Taxes	\$0.00	\$36,977.78	\$36,977.78
0-210-7130-000	Employee-Medical Insurance	\$0.00	\$13,764.33	\$13,764.33
0-210-7131-000	Employee-HRA	\$0.00	\$1,246.44	\$1,246.44
0-210-7133-000	Employee-Pharmacy	\$0.00	\$5,102.48	\$5,102.48
0-210-7134-000	Employee-Dental Insurance	\$0.00	\$1,089.08	\$1,089.08
0-210-7135-000	Employee-401K Match	\$0.00	\$8,815.77	\$8,815.77
0-210-7140-000	Employee-Disability Insurance	\$0.00	(\$580.78)	(\$580.78)
0-210-7150-000	Employee-Life Insurance	\$0.00	\$10,951.93	\$10,951.93
0-210-7220-000	Legal Services	\$0.00	\$594,022.22	\$594,022.22
0-210-7230-000	Professional Services	\$0.00	\$124,864.11	\$124,864.11
0-210-7310-000	Office Supplies & Stat	\$0.00	\$933.09	\$933.09
0-210-7320-000	Postage	\$0.00	\$16.13	\$16.13
0-210-7360-000	Printing	\$0.00	\$5,803.95	\$5,803.95
0-210-7370-000	Food And Beverage	\$0.00	\$443.40	\$443.40
0-210-7410-000	Rent	\$0.00	\$10,365.76	\$10,365.76
0-210-7415-000	Outside Storage Cost	\$0.00	\$480.85	\$480.85
0-210-7430-000	Maintenance & Repairs & Leases	\$0.00	\$1,746.23	\$1,746.23
0-210-7450-000	Insurance Expense	\$0.00	\$2,060.53	\$2,060.53
0-210-7550-000	Computer Equipment Purchases	\$0.00	\$1,961.17	\$1,961.17
0-210-7610-000	Staff Dev & Training	\$0.00	\$2,986.68	\$2,986.68
0-210-7620-000	Staff Travel	\$0.00	\$6,406.12	\$6,406.12
0-210-7621-000	Mileage	\$0.00	\$297.90	\$297.90
0-210-7623-000	Parking	\$0.00	\$160.71	\$160.71
0-210-7909-000	Business Entertainment & Donations	\$0.00	\$12,817.37	\$12,817.37
0-210-7920-000	Dues, Memberships & Subs	\$0.00	\$38,075.81	\$38,075.81
0-210-7921-000	Licensing	\$0.00	\$20.00	\$20.00
0-210-7970-000	Telephone & Telegraph	\$0.00	\$1,267.45	\$1,267.45
0-220-7030-000	Salaries & Wages	\$0.00	\$213,345.57	\$213,345.57
0-220-7040-000	Overtime Wages	\$0.00	\$54.80	\$54.80
0-220-7110-000	Payroll Taxes	\$0.00	\$18,041.23	\$18,041.23
0-220-7130-000	Employee-Medical Insurance	\$0.00	\$12,175.94	\$12,175.94
0-220-7131-000	Employee-HRA	\$0.00	\$1,513.63	\$1,513.63
0-220-7133-000	Employee-Pharmacy	\$0.00	\$5,202.84	\$5,202.84
0-220-7134-000	Employee-Dental Insurance	\$0.00	\$1,020.17	\$1,020.17
0-220-7135-000	Employee-401K Match	\$0.00	(\$5,332.16)	(\$5,332.16)
0-220-7140-000	Employee-Disability Insurance	\$0.00	(\$386.39)	(\$386.39)
0-220-7150-000	Employee-Life Insurance	\$0.00	\$2,391.86	\$2,391.86
0-220-7160-000	Worker's Compensation Ins	\$0.00	\$74,098.23	\$74,098.23
0-220-7210-000	Accounting & Auditing Serv	\$0.00	\$46,400.00	\$46,400.00
0-220-7211-000	Bank Charges	\$0.00	\$46,710.80	\$46,710.80
0-220-7212-000	ADP Fees	\$0.00	\$23,050.15	\$23,050.15
0-220-7230-000	Professional Services	\$0.00	\$7,981.02	\$7,981.02
0-220-7270-000	Temporary Help	\$0.00	\$1,282.68	\$1,282.68
0-220-7310-000	Office Supplies & Stat	\$0.00	\$1,730.02	\$1,730.02
0-220-7320-000	Postage	\$0.00	\$52,969.58	\$52,969.58
0-220-7360-000	Printing	\$0.00	\$1,519.65	\$1,519.65
0-220-7370-000	Food And Beverage	\$0.00	\$450.43	\$450.43
0-220-7410-000	Rent	\$0.00	\$9,865.83	\$9,865.83
0-220-7415-000	Outside Storage Cost	\$0.00	\$202.99	\$202.99
0-220-7430-000	Maintenance & Repairs & Leases	\$0.00	\$11,267.81	\$11,267.81
0-220-7610-000	Staff Dev & Training	\$0.00	\$250.00	\$250.00
0-220-7620-000	Staff Travel	\$0.00	\$227.36	\$227.36
0-220-7621-000	Mileage	\$0.00	\$649.60	\$649.60



MMCC  
CASH FLOW  
EXHIBIT "B"

Raw Number	Discription	Beg Bal	Net Change	Ending Bal	
0-220-7623-000	Parking	\$0.00	\$14.00	\$14.00	
0-220-7671-000	Employee Events	\$0.00	\$120.00	\$120.00	
0-220-7920-000	Dues, Memberships & Subs	\$0.00	\$1,652.00	\$1,652.00	
0-220-7921-000	Liscensing	\$0.00	\$2,302.81	\$2,302.81	
0-220-7922-000	Property Tax	\$0.00	\$5,004.00	\$5,004.00	
0-220-7923-000	Liquidated Damages	\$0.00	\$3,800.00	\$3,800.00	
0-220-7960-000	Depreciation	\$0.00	\$362,277.25	\$362,277.25	
0-220-7970-000	Telephone & Telegraph	\$0.00	\$265.07	\$265.07	
0-230-7030-000	Salaries & Wages	\$0.00	\$114,076.06	\$114,076.06	
0-230-7040-000	Overtime Wages	\$0.00	\$122.79	\$122.79	
0-230-7110-000	Payroll Taxes	\$0.00	\$7,054.02	\$7,054.02	
0-230-7130-000	Employee-Medical Insurance	\$0.00	\$11,657.19	\$11,657.19	
0-230-7131-000	Employee-HRA	\$0.00	\$3,805.30	\$3,805.30	
0-230-7132-000	Employee-Wellness	\$0.00	(\$95.68)	(\$95.68)	
0-230-7133-000	Employee-Pharmacy	\$0.00	(\$11,453.91)	(\$11,453.91)	
0-230-7134-000	Employee-Dental Insurance	\$0.00	\$1,059.23	\$1,059.23	
0-230-7135-000	Employee-401K Match	\$0.00	\$1,027.45	\$1,027.45	
0-230-7140-000	Employee-Disability Insurance	\$0.00	(\$327.56)	(\$327.56)	
0-230-7150-000	Employee-Life Insurance	\$0.00	\$2,978.19	\$2,978.19	
0-230-7230-000	Professional Services	\$0.00	\$51,373.99	\$51,373.99	
0-230-7270-000	Temporary Help	\$0.00	\$1,894.75	\$1,894.75	
0-230-7310-000	Office Supplies & Stat	\$0.00	(\$2,065.09)	(\$2,065.09)	
0-230-7320-000	Postage	\$0.00	\$7,249.44	\$7,249.44	
0-230-7360-000	Printing	\$0.00	\$18,756.19	\$18,756.19	
0-230-7370-000	Food And Beverage	\$0.00	\$432.79	\$432.79	
0-230-7410-000	Rent	\$0.00	\$9,678.72	\$9,678.72	
0-230-7415-000	Outside Storage Cost	\$0.00	\$91.41	\$91.41	
0-230-7430-000	Maintenance & Repairs & Leases	\$0.00	\$10,663.95	\$10,663.95	
0-230-7510-000	Leased Equipment	\$0.00	\$53,728.23	\$53,728.23	
0-230-7610-000	Staff Dev & Training	\$0.00	(\$231.33)	(\$231.33)	
0-230-7621-000	Mileage	\$0.00	\$107.50	\$107.50	
0-230-7671-000	Employee Events	\$0.00	\$10,884.50	\$10,884.50	
0-230-7909-000	Business Entertainment & Donations	\$0.00	\$2,212.66	\$2,212.66	
0-230-7915-000	Recruitment Expense	\$0.00	\$4,661.10	\$4,661.10	
0-230-7920-000	Dues, Memberships & Subs	\$0.00	\$6,697.16	\$6,697.16	
0-230-7921-000	Liscensing	\$0.00	\$8,991.77	\$8,991.77	
0-230-7970-000	Telephone & Telegraph	\$0.00	\$246.71	\$246.71	
0-240-7030-000	Salaries & Wages	\$0.00	\$525,367.98	\$525,367.98	
0-240-7040-000	Overtime Wages	\$0.00	\$408.48	\$408.48	
0-240-7110-000	Payroll Taxes	\$0.00	\$44,001.02	\$44,001.02	
0-240-7130-000	Employee-Medical Insurance	\$0.00	\$42,250.03	\$42,250.03	
0-240-7131-000	Employee-HRA	\$0.00	\$8,481.11	\$8,481.11	
0-240-7133-000	Employee-Pharmacy	\$0.00	\$17,123.56	\$17,123.56	
0-240-7134-000	Employee-Dental Insurance	\$0.00	\$3,667.84	\$3,667.84	
0-240-7135-000	Employee-401K Match	\$0.00	\$6,141.94	\$6,141.94	
0-240-7140-000	Employee-Disability Insurance	\$0.00	(\$230.52)	(\$230.52)	
0-240-7150-000	Employee-Life Insurance	\$0.00	\$7,430.63	\$7,430.63	
0-240-7230-000	Professional Services	\$0.00	\$703,724.71	\$703,724.71	
0-240-7310-000	Office Supplies & Stat	\$0.00	\$4,950.09	\$4,950.09	
0-240-7320-000	Postage	\$0.00	\$156.31	\$156.31	
0-240-7360-000	Printing	\$0.00	\$85.22	\$85.22	
0-240-7370-000	Food And Beverage	\$0.00	\$1,479.57	\$1,479.57	
0-240-7410-000	Rent	\$0.00	\$36,685.05	\$36,685.05	
0-240-7415-000	Outside Storage Cost	\$0.00	\$945.86	\$945.86	
0-240-7430-000	Maintenance & Repairs & Leases	\$0.00	\$105,446.37	\$105,446.37	
0-240-7435-000	EDP	\$0.00	\$246,166.21	\$246,166.21	
0-240-7510-000	Leased Equipment	\$0.00	\$56,108.50	\$56,108.50	
0-240-7550-000	Computer Equipment Purchases	\$0.00	\$61,838.42	\$61,838.42	
0-240-7610-000	Staff Dev & Training	\$0.00	\$64,588.25	\$64,588.25	
0-240-7620-000	Staff Travel	\$0.00	\$8,886.09	\$8,886.09	
0-240-7621-000	Mileage	\$0.00	\$723.18	\$723.18	
0-240-7623-000	Parking	\$0.00	\$378.00	\$378.00	
0-240-7671-000	Employee Events	\$0.00	\$1,212.43	\$1,212.43	
0-240-7920-000	Dues, Memberships & Subs	\$0.00	\$2,115.00	\$2,115.00	
0-240-7921-000	Liscensing	\$0.00	\$149,790.81	\$149,790.81	
0-240-7970-000	Telephone & Telegraph	\$0.00	\$101,544.08	\$101,544.08	
0-250-7030-000	Salaries & Wages	\$0.00	\$121,678.10	\$121,678.10	
0-250-7110-000	Payroll Taxes	\$0.00	\$9,084.36	\$9,084.36	
0-250-7130-000	Employee-Medical Insurance	\$0.00	\$7,874.21	\$7,874.21	
0-250-7131-000	Employee-HRA	\$0.00	\$464.15	\$464.15	
0-250-7133-000	Employee-Pharmacy	\$0.00	\$3,692.06	\$3,692.06	
0-250-7134-000	Employee-Dental Insurance	\$0.00	\$327.17	\$327.17	
0-250-7135-000	Employee-401K Match	\$0.00	\$1,778.02	\$1,778.02	
0-250-7140-000	Employee-Disability Insurance	\$0.00	(\$93.92)	(\$93.92)	
0-250-7150-000	Employee-Life Insurance	\$0.00	\$1,220.00	\$1,220.00	
0-250-7310-000	Office Supplies & Stat	\$0.00	\$438.24	\$438.24	
0-250-7360-000	Printing	\$0.00	\$147.49	\$147.49	
0-250-7370-000	Food And Beverage	\$0.00	\$362.06	\$362.06	
0-250-7410-000	Rent	\$0.00	\$7,376.62	\$7,376.62	
0-250-7430-000	Maintenance & Repairs & Leases	\$0.00	\$113.30	\$113.30	
0-250-7510-000	Leased Equipment	\$0.00	\$478.51	\$478.51	
0-250-7610-000	Staff Dev & Training	\$0.00	\$745.00	\$745.00	
0-250-7620-000	Staff Travel	\$0.00	\$3,212.07	\$3,212.07	
0-250-7909-000	Business Entertainment & Donations	\$0.00	\$291.89	\$291.89	
0-250-7970-000	Telephone & Telegraph	\$0.00	\$597.50	\$597.50	
0-270-7030-000	Salaries & Wages	\$0.00	\$15,525.14	\$15,525.14	
0-270-7110-000	Payroll Taxes	\$0.00	\$1,245.40	\$1,245.40	
0-270-7130-000	Employee-Medical Insurance	\$0.00	\$3,158.68	\$3,158.68	
0-270-7132-000	Employee-Wellness	\$0.00	(\$10.00)	(\$10.00)	
0-270-7133-000	Employee-Pharmacy	\$0.00	\$1,197.36	\$1,197.36	
0-270-7134-000	Employee-Dental Insurance	\$0.00	\$89.75	\$89.75	
0-270-7135-000	Employee-401K Match	\$0.00	\$62.40	\$62.40	
0-270-7150-000	Employee-Life Insurance	\$0.00	\$204.34	\$204.34	
0-270-7310-000	Office Supplies & Stat	\$0.00	\$759.03	\$759.03	
0-270-7370-000	Food And Beverage	\$0.00	\$15.03	\$15.03	
0-270-7430-000	Maintenance & Repairs & Leases	\$0.00	\$6.88	\$6.88	
0-270-7550-000	Computer Equipment Purchases	\$0.00	(\$112.02)	(\$112.02)	
0-270-7610-000	Staff Dev & Training	\$0.00	\$960.00	\$960.00	
0-270-7671-000	EMPLOYEE EVENTS	\$0.00	\$120.67	\$120.67	
0-270-7970-000	Telephone & Telegraph	\$0.00	\$26.27	\$26.27	
0-290-7030-000	Salaries & Wages	\$0.00	\$71,743.06	\$71,743.06	
0-290-7110-000	Payroll Taxes	\$0.00	\$6,498.49	\$6,498.49	
0-290-7130-000	Employee-Medical Insurance	\$0.00	\$4,025.30	\$4,025.30	
0-290-7131-000	Employee-HRA	\$0.00	\$782.39	\$782.39	
0-290-7133-000	Employee-Pharmacy	\$0.00	\$1,695.80	\$1,695.80	
0-290-7134-000	Employee-Dental Insurance	\$0.00	\$461.75	\$461.75	
0-290-7135-000	Employee-401K Match	\$0.00	\$2,147.65	\$2,147.65	
0-290-7140-000	Employee-Disability Insurance	\$0.00	(\$42.36)	(\$42.36)	
0-290-7150-000	Employee-Life Insurance	\$0.00	\$766.96	\$766.96	
0-290-7230-000	Professional Services	\$0.00	\$13,224.45	\$13,224.45	
0-290-7310-000	Office Supplies & Stat	\$0.00	\$604.39	\$604.39	
0-290-7370-000	Food And Beverage	\$0.00	\$144.19	\$144.19	
0-290-7410-000	Rent	\$0.00	\$3,342.19	\$3,342.19	
0-290-7430-000	Maintenance & Repairs & Leases	\$0.00	\$87.94	\$87.94	
0-290-7610-000	Staff Dev & Training	\$0.00	\$62.00	\$62.00	
0-290-7620-000	Staff Travel	\$0.00	\$452.91	\$452.91	
0-290-7623-000	Parking	\$0.00	\$2.50	\$2.50	
0-290-7920-000	Dues, Memberships & Subs	\$0.00	\$30.00	\$30.00	
0-290-7921-000	Liscensing	\$0.00	\$109,390.34	\$109,390.34	
0-290-7970-000	Telephone & Telegraph	\$0.00	\$458.18	\$458.18	
	OPERATING EXPENSES	(\$9,809,695.80)	\$4,914,735.65	(\$4,894,960.15)	(4,914,735.65)
	NET CASH OPERATIONS				(7,035,990.48)
0-000-1930-000	Investment In MHS	\$1,415,186.00	(\$2,724.00)	\$1,412,462.00	
0-000-1110-000	Unrestricted-Longterm Investments	\$11,141,843.93	(\$779,806.79)	\$10,362,037.14	
0-000-1111-000	Restricted-Longterm Investments	\$9,149,380.85	\$13,110.65	\$9,162,491.50	
	INVESTMENT CASH		(769,420.14)		769,420.14
	NET CASH INVESTMENTS				769,420.14
0-000-3010-000	Beginning Fund Balance	(\$2,100,000.00)	(\$1,599,498.00)	(\$3,699,498.00)	
0-000-3020-000	Cap Improvement Fund Bal	\$6,400,502.00	(\$6,400,502.00)	\$0.00	
0-000-3025-000	Surplus Pd to Owners	\$0.00	\$8,000,000.00	\$8,000,000.00	

**MMCC  
CASH FLOW  
EXHIBIT "B"**

<b>Raw Number</b>	<b>Description</b>	<b>Beg Bal</b>	<b>Net Change</b>	<b>Ending Bal</b>		
0-000-3030-000	Prior Years Gain/(Loss)	(\$36,431,588.18)	\$0.00	(\$36,431,588.18)		
	<b>SURPLUS-PAID IN CAPITAL</b>		<b>\$0.00</b>		<b>0.00</b>	
0-000-1610-000	Prepaids	\$163,664.33	\$593,382.60	\$757,046.93		
0-000-1730-000	Furniture, Fixtures & Equip.	\$793,105.52	( <b>\$635,527.64</b> )	\$157,577.88		
0-000-1740-000	Leasehold Improvements	\$124,969.03	\$61,239.98	\$186,209.01		
0-000-1751-000	EDP--Phone System	\$337,203.88	\$35,922.81	\$373,126.69		
0-000-1753-000	EDP--Hardware	\$3,501,427.18	( <b>\$2,708,597.24</b> )	\$792,829.94		
0-000-1755-000	EDP--Software	\$3,794,988.09	( <b>\$3,135,213.44</b> )	\$659,774.65		
0-000-1760-000	Office Equipment	\$204,221.87	( <b>\$171,190.30</b> )	\$33,031.57		
0-000-1761-000	Automobiles	\$40,884.38	\$0.00	\$40,884.38		
	<b>OTHER INVESTED ASSETS</b>		<b>(5,959,983.23)</b>		<b>5,959,983.23</b>	
	<b>NET CASH FINANCING &amp; MISC.</b>					<b>5,959,983.23</b>
				<b>TOTAL CHANGE IN CASH</b>	<b>(306,587.11)</b>	
				<b>NET CHANGE</b>	<b>(306,587.11)</b>	
				<b>VARIANCE</b>	<b>(0.00)</b>	